

Supervisor John Gioia, Chair Supervisor Candace Andersen, Vice Chair

Agenda Items: Items may be taken out of order based on the business of the day and preference of the Co	ommittee
---	----------

- 1. Introductions
- 2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to three minutes).
- 3. RECEIVE and APPROVE the draft Record of Action for the May 18, 20209 Special Meeting of the Family & Human Services Committee.
- 4. CONSIDER making recommendations to the Board of Supervisors on the following advisory body appointments, re-appointments or vacancies:
 - a. RECOMMEND the Board of Supervisor appoint local Workforce Development Board (WDB) candidates for vacant Board seats as approved by the WDB Executive Committee at their June 10, 2020 meeting. All seats have terms from July 1, 2020 to June 30, 2024.
 - Tom Guarino Workforce Business Seat #5
 - Carolina Herrera Workforce Business Seat #8
 - Laura Trevino Workforce Business Seat #10
 - Stephanie Rivera Workforce Business Seat #11
 - Corry Kennedy Workforce Business Seat #13
 - Kelly Schelin Education & Training Seat #2
 - Leslay Choy Flex Additional Seat #1
 - b. RECOMMEND that the Board of Supervisors:
 - 1. DECLARE a previous vacancy, due to resignation, for the Member-at-Large Seat V on the Alcohol and Other Drug Advisory Board for a term that ends on June 30, 2020;
 - 2. DECLARE a vacancy, due to resignation, for the Member-at-Large Seat VI seat on the Alcohol and Other Drug Advisory Board for term that expires on June 30, 2022; AND
 - 3. REAPPOINT Jonathan Ciampi to the Member-at-Large I seat on the Alcohol and Other Drug Advisory Board for a term expiring on June 30, 2023.

- 5. CONSIDER receiving a report from the Employment and Human Services Department on the implementation of the CalFresh benefit expansion, update on the CalFresh Outreach Plan and CalFresh staffing needs. (Kathy Gallagher, Employment and Human Services Director)
- 6. CONSIDER receiving a report from the Health Services Department on needle exchange prevention as part of a comprehensive approach to reduce transmission of HIV in Contra Costa County; and

DIRECT the Health Services Department to continue supporting and monitoring sterile needle exchange services and adopt a modified "needs-based" distribution exchange model with built-in incentives to return used needles as presented in the document titled "Needle Exchange Recommendation to Change Model. (Jessica Osorio, HIV/AIDS and STD Deputy Director)

- 7. CONSIDER receiving a report on the status of the Mental Health Services Act Plan and funding from the Health Services Department Behavioral Health Division. (Jennifer Bruggeman, Mental Health Services Act Program Manager)
- 8. REVIEW the Family and Human Services Annual Workplan and provide direction to staff as needed.
- 9. The next meeting is currently scheduled for July 27, 2020.
- 10. Adjourn

The Family & Human Services Committee will provide reasonable accommodations for persons with disabilities planning to attend Family & Human Services Committee meetings. Contact the staff person listed below at least 72 hours before the meeting.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Family & Human Services Committee less than 96 hours prior to that meeting are available for public inspection at 651 Pine Street, 10th floor, during normal business hours.

Public comment may be submitted via electronic mail on agenda items at least one full work day prior to the published meeting time.

For Additional Information Contact:

Dennis Bozanich, Committee Staff Phone (925) 335-1037, Fax (925) 646-1353 Dennis.Bozanich@cao.cccounty.us



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

3.

			5.
Meeting Date:	06/22/2020		
<u>Subject:</u>	RECORD OF ACTION FOR MEETING	THE NOV	EMBER 13, 2019 FHS
Submitted For:	FAMILY & HUMAN SERV	ICES COM	MITTEE,
<u>Department:</u>	County Administrator		
Referral No.:	NA		
Referral Name:	NA		
Presenter:	Dennis Bozanich	<u>Contact:</u>	Dennis Bozanich; 5-1037

Referral History:

County Ordinance requires that each County body keep a record of its meetings. Though the record need not be verbatim, it must accurately reflect the agenda and the decisions made in the meeting.

Referral Update:

Attached is the draft Record of Action for the May 18, 2020 Family & Human Services Committee Special Meeting.

Recommendation(s)/Next Step(s):

RECEIVE and APPROVE the draft Record of Action for the May 18, 2020 Family & Human Services Committee Special Meeting.

Fiscal Impact (if any):

None

Attachments

Record of Action for May 18, 2020 Special Meeting





FAMILY AND HUMAN SERVICES COMMITTEE

RECORD OF ACTION FOR May 18, 2020

Supervisor John Gioia, Chair Supervisor Candace Andersen, Vice Chair

Present: John Gioia, Chair Candace Andersen, Vice Chair

- 1. Introductions
- 2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to three minutes).

No public comment.

AYE: Chair John Gioia Vice Chair Candace Andersen

3. RECEIVE and APPROVE the draft record of Action for the February 24, 2020 Family & Human Services Committee Meeting.

The committee moved the recommended action.

No public comment. Approved as recommended.

AYE: Chair John Gioia Vice Chair Candace Andersen

4. CONSIDER making the recommendations to the Board of Supervisors on the following advisory body appointments, re-appointments or vacancies:

a. The Advisory Committee requests replacement of Member Keegan for excessive absenteeism.

The committee moved the recommended action.

No public comment. Approved as recommended.

AYE: Chair John Gioia Vice Chair Candace Andersen

b. Committee recommends that the Board of Supervisors appoint Evelyn Howard to Set #5 of the Alcohol & Other Drugs Advisory Board following the resignation of Michael Collins.

The committee moved the recommended action in addition recommended appointment for the subsequent term.

No public comment. Approved as recommended.

AYE: Chair John Gioia Vice Chair Candace Andersen

c. RECOMMEND to the Board of Supervisors the appointment of Nancy Leasure to At Large #8 seat with a term expiring September 30, 2020 on the Advisory Council on Aging, as recommended by the Council.

The committee moved the recommended action.

No public comment. Approved as recommended.

AYE: Chair John Gioia

Vice Chair Candace Andersen

d. RECOMMEND approval of local board candidates for the re-appointment for the following board seats. (Attached application and board roster)

• Workforce Business Seat #1 - Michael McGill - Approved on February 4, 2020 at the Full Board Meeting

Governmental & Economic & Community Development Seat #1 - Carol Asch -

Approved on February 4, 2020 at the Full Board Meeting

RECOMMEND approval of local board candidates for the vacant board seats. (Attached application and board roster)

• Workforce Business Seat #3 - Yolanda Vega – Approved on February 4, 2020 at the Full Board Meeting

• Governmental & Economic & Community Development Seat #3 - Kwame Reed – Approved on February 4, 2020 at the Full Board Meeting

**No other candidate competed for the Workforce Business Seat #1 & #3 and Governmental &

Economic & Community Development Seat #1 & #3**

The committee moved the recommended action.

No public comment. Approved as recommended.

AYE: Chair John Gioia Vice Chair Candace Andersen

e. RECOMMEND approval of local board candidates for the re-appointment for the following board seats. (Attached application and board roster)
Governmental & Economic & Community Development Seat #2 - Richard Johnson – Approved on May 5, 2020 at the Full Board Meeting

RECOMMEND approval of local board candidates for the vacant board seats. (Attached application and board roster)

• Workforce Business Seat #7 - Stacey Marshall – Approved on May 5, 2020 at the Full Board Meeting

No other candidate competed for the Workforce Business Seat #7 and Governmental & Economic & Community Development Seat #2

The committee moved the recommended action.

No public comment. Approved as recommended.

AYE: Chair John Gioia Vice Chair Candace Andersen

5. Adjourn

For Additional Information Contact:

Dennis Bozanich, Committee Staff Phone (925) 335-1037, Fax (925) 646-1353 Dennis.Bozanich@cao.cccounty.us



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUN COMMITTEE	MAN SERVICES		4.
Meeting Date:	06/22/2020		
<u>Subject:</u>	CONSIDER recommendation body appointments, re-appoint		÷ ,
Department:	County Administrator		
Referral No.:	NA		
Referral Name:	Advisory Body Appointment	S	
Presenter:	Dennis Bozanich	Contact:	Dennis Bozanich; 5-1037

Referral History:

On December 6, 2011 the Board of Supervisors adopted Resolution No. 2011/497 adopting policy governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at large/countywide seats be reviewed by a Board of Supervisors committee.

Referral Update:

Recommendation(s)/Next Step(s):

CONSIDER each of the following advisory board appointments, re-appointments or vacancy declarations for possible recommendation to the Board of Supervisors.

Fiscal Impact (if any):

NA

Attachments

No file(s) attached.



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

4. a.

Meeting Date:	06/22/2020	
<u>Subject:</u>	Appointments to the Workfo	orce Development Board
Submitted For:	FAMILY & HUMAN SER	VICES COMMITTEE,
Department:	County Administrator	
<u>Referral No.:</u>	NA	
Referral Name:	Advisory Board Appointme	nt
Presenter:	Dennis Bozanich	Contact: Dennis Bozanich; 5-1037

<u>Referral History:</u>

On December 13, 2011, The Board of Supervisors adopted Resolution No. 2011/498 adopting policy governing appointments to independent boards, committees, and commissions, and special districts. Included in this resolution was a requirement that independent bodies initially conducting interviews for At Large/Countywide seats provide appointment recommendations to a Board Committee for further review. The Workforce Development Board implements federal requirements for programs to address the education, skills, and employment needs for a skilled workforce, and that lead to an increase in the skills and earnings of Contra Costa residents.

On March 14, 2016, the Family and Human Services Committee (FHS) accepted the Employment and Human Services Department's recommendation to decertify the then-current Workforce Investment Act local Board and re-certify a new board structure in compliance with the new Workforce Innovation and Opportunity Act (WIOA). FHS approved these recommendations, and the Board did the same at its March 29, 2016 meeting.

Under new standards in WIOA (2016) and as adopted by the Board on March 29, 2016, the new Workforce Development Board structure is: a total of 23 required seats and 2 "optional seats", consisting of: 13 Business representatives, 5 Workforce representatives, and 5 Education and Training representatives as follows: (1) Adult Education/Literacy; (2) Higher Education; (3) Economic & Community Development; (4) Wagner Peyser representative; (5) Vocational Rehabilitation. Also two additional/ "optional" seats that may be filled from any of the 3 categories above.

The Executive Committee of the local WIOA board met January 21, 2016 and approved a recommended WIOA Board configuration, subsequently approved by the Board of Supervisors on March 29, 2016.

Referral Update:

Local board structure and size:

Compared to predecessor legislation, the Workforce Innovation and Opportunity Act (WIOA) substantially changes Local Board composition by reducing local workforce development board size while maintaining a business and industry majority and ensuring representation from labor and employment and training organizations. Category – Representatives of Business (WIOA Section 107(b)(2)(A))

- Thirteen (13) representatives (52%)
- Category Representatives of Workforce (WIOA Section 107(b)(2)(A))
 Five (5) representatives (20%)
- Category Representatives of Education and Training (WIOA Section 107(b)(2)(C))
 - One (1) Adult Education/Literacy Representative (WIOA title II)
 - One (1) Higher Education Representative
 - One (1) Economic and Community Development Representative
 - One (1) Wagner Peyser Representative
 - One (1) Vocational Rehabilitation Representative
- Two (2) additional seats from the above categories, including constituencies referenced in Attachment III of Training Employment & Guidance Letter (TEGL) 27-14. The WDB Executive Committee, on June 10, 2020, recommends Board of Supervisors appoint the following individuals to the respected seats for terms that begin July 1, 2020 and expire on June 30, 2024:
- Tom Guarino Workforce Business Seat #5;
- Carolina Herrera Workforce Business Seat #8;
- Laura Trevino Workforce Business Seat #10;
- Stephanie Rivera Workforce Business Seat #11;
- Corry Kennedy Workforce Business Seat #13;
- Kelly Schelin Education & Training Seat #2; and
- Leslay Choy Flex Additional Seat #1.

No other candidate competed for the Workforce Business Seat #5, #8, #10,#11, & #13 and Education & Training Seat #2 and Flex Additional Seat #1.

Recommendation(s)/Next Step(s):

Board of Supervisor may consider appointing local Workforce Development Board (WDB) candidates for vacant Board seats as approved by the WDB Executive Committee at their June 10, 2020 meeting. All seats have terms from July 1, 2020 to June 30, 2024.

- Tom Guarino Workforce Business Seat #5
- Carolina Herrera Workforce Business Seat #8
- Laura Trevino Workforce Business Seat #10
- Stephanie Rivera Workforce Business Seat #11
- Corry Kennedy Workforce Business Seat #13
- Kelly Schelin Education & Training Seat #2
- Leslay Choy Flex Additional Seat #1

Fiscal Impact (if any):

NA

Department Memo Appointment Applications WDB Roster - June 2020

E.





EXECUTIVE DIRECTOR

MEMORANDUM

SUBJECT:	Appointment to Workforce Development Board
FROM:	Donna Van Wert, Executive Director
CC:	Dennis Bozanich, CAO Sr. Deputy County Administrator
TO:	Family and Human Services Committee
DATE:	June 10, 2020

This memorandum requests the Family and Human Services Committee recommend to the Contra Costa County Board of Supervisors the appointment of the following candidates to the new WIOA compliant Workforce Development Board of Contra Costa County.

Background:

Local board structure and size:

Compared to predecessor legislation, the Workforce Innovation and Opportunity Act (WIOA) substantially changes Local Board composition by reducing local workforce development board size while maintaining a business and industry majority and ensuring representation from labor and employment and training organizations.

To meet the categorical membership percentages, the WDB recommended a board of twenty-five (25) members. This option represents the minimum required local board size under WIOA plus an additional six (6) optional representatives in the following enumerated categories: 1) business; 2) workforce; 3) education and training.

Category – Representatives of Business (WIOA Section 107(b)(2)(A))

• Thirteen (13) representatives (52%)

Category – Representatives of Workforce (WIOA Section 107(b)(2)(A))

• Five (5) representatives (20%)

Category – Representatives of Education and Training (WIOA Section 107(b)(2)(C))

- One (1) Adult Education/Literacy Representative (WIOA title II)
- One (1) Higher Education Representative
- One (1) Economic and Community Development Representative
- One (1) Wagner Peyser Representative
- One (1) Vocational Rehabilitation Representative

Two (2) additional seats from the above categories, including constituencies referenced in Attachment III of Training Employment & Guidance Letter (TEGL) 27-14.

Recommendation:

- a) Recommend approval of local board candidates for the vacant board seats. (Attached application and board roster) Approved on June 10, 2020 at the Executive Committee Meeting
 - Tom Guarino Workforce Business Seat #5
 - Carolina Herrera Workforce Business Seat #8
 - Laura Trevino Workforce Business Seat #10
 - Stephanie Rivera Workforce Business Seat #11
 - Corry Kennedy Workforce Business Seat #13
 - Kelly Schelin Education & Training Seat #2
 - Leslay Choy Flex Additional Seat #1

No other candidate competed for the Workforce Business Seat #5, #8, #10,#11, & #13 and Education & Training Seat #2 and Flex Additional Seat #1

Seat	Last Name	First Name	Address &	Term	Term of	District
			District #	Start Date	Expiration	(Resident)
Workforce	Guarino	Tom	Buskirk Ave,	7/1/2020	6/30/2024	District #4
Business Seat # 5			Ste.			
			Pleasant Hill, CA			
			District #4			
Workforce	Herrera	Carolina	Walnut Creek, CA	7/1/2020	6/30/2024	District #4
Business Seat #8			District 4			
Workforce	Trevino	Laura	Buskirk Ave,	7/1/2020	6/30/2024	District #5
Business Seat #10			Ste.			
			Pleasant Hill, CA			
			District #4			
Workforce	Rivera	Stephanie	Treat Blvd.	7/1/2020	6/30/2024	District #4
Business Seat #11			Walnut Creek, CA			
			District #4			
Workforce	Kennedy	Corry	Celeste Ave.	7/1/2020	6/30/2024	District #4
Business Seat #13			Walnut Creek, CA			
			District#4			
Education &	Schelin	Kelly	Court St,	7/1/2020	6/30/2024	District #5
Training Seat #2			Martinez, CA			
	-		District #5	- / . /	- /	
Flex Additional	Choy	Leslay	San Pablo	7/1/2020	6/30/2024	District #1
Seat #1			Ave. Ste.			
			San Pablo, CA			
			District #1			

NEW APPOINTMENT

Thank you

DVW/rms attachment



Please return completed applications to:

Clerk of the Board of Supervisors 651 Pine St., Room 106 Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

Contra

Costa

County

First Name		Last Name		
Tom		Guarino		
Home Address - Street	City		_	Zip Code
Phone (best number to reach you)		Email	•	
Resident of Supervisorial District:				
EDUCATION Check appropriate back	x if you possess	one of the following:		
		Proficiency Certificate		G.E.D. Certificate
	-		D	
Colleges or Universities Attended	Course of Study	•	_	e Awarded
Cal Poly, Pomona	Bena	wiroal Sciences		es 🗌 No
				es 🛛 No
			□ Y	es 🛛 No
Other Training Completed:				
Board, Committee or Commission Name		Seat Name		
Workforce Development Board				
Have you ever attended a meeting of the a	dvisory board f	or which you are applyi	ng?	
🗆 No 🔳 Yes	s If yes, how	/ many?		
Please explain why you would like to serve	on this particu	lar hoard committee o	r comp	nission
		lar bourd, committee, o	- comi	
It aligns for my passion.				
Describe your qualifications for this appoint	ntment. (NOTE:)	you may also include a c	opy of	
your resume with this application	on)			
35 years experience in this field.				
I am including my resume with this applica	ition:			
		No		
			Imaria	a qualified
I would like to be considered for appointm Please check one:		No	i may b	e quaimeu.

Are you currently or have you ever been appointed to a Contra Costa County advis Please check one:	sory boar	d?
List any volunteer and community experience, including any boards on which you	ı have ser	ved.
Too many to mention. Please to testify orally and publicly.		
Do you have a familial relationship with a member of the Board of Supervisors? (P the relationships listed below or Resolution no. 2011/55) Please check one:	Please refe	er to
Do you have any financial relationships with the county, such as grants, contracts, other economic relationships? Please check one: ■ Yes □ No If Yes, please identify the nature of the relationship:		greement via my employer, PG&E
I CERTIFY that the statements made by me in this application are true, complete, an knowledge and belief, and are made in good faith. I acknowledge and understand th application is publicly accessible. I understand and agree that misstatements and/or cause forfeiture of my rights to serve on a board, committee, or commission in Com	hat all info r ommissi	ormation in this ons of material fact may County.
Signed:	Date:	5.12.20
Submit this application to:Clerk of the Board of Supervisors651 Pine St., Room 106Martinez, CA 94553		
Questions about this application? Contact the Clerk of the Board at (925) 3	35-1900 a	or by email at
ClerkofTheBoard@cob.cccounty.us		
1. This application and any attachments you provide to it is a public document and is subject to the Cali Code §6250-6270).	ifornia Publi	c Records Act (CA Government
2. All members of appointed bodies are required to take the advisory body training provided by Contra	Costa Coun	ty.

3. Members of certain boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.

4. Meetings may be held in various locations and some locations may not be accessible by public transportation.

5. Meeting dates and times are subject to change and may occur up to two (2) days per month.

6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

7. As indicated in Board Resolution 2011/55, a person will not be eligible for appointment if he/she is related to a Board of Supervisors member in any of the following relationships: mother, father, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, great-granddaughter, first-cousin, husband, wife, father-in-law, mother-in-law, daughter-in-law, stepson, stepdaughter, sister-in-law, brother-in-law, spouse's grandmother, spouse's grandfather, spouse's gra

8. A person will not be eligible to serve if the person shares a financial interest as defined in Government Code §87103 with a Board of Supervisors Member.

Application Form

A1c

Carolina		Herrera		
rst Name	Middle Initial	Last Name		
ome Address			Suite or Apt	
ity			State	Postal Code
rimary Phone				
mail Address				
Which supervisorial d	listrict do you live in	?		
District 4				
		school educatio	n *	
Select the option that		school educatio	n *	
High School Diploma College/ University A	ι	school educatio	n *	
High School Diploma College/ University A	ι	school educatio	n *	
High School Diploma College/ University A Name of College Atter	ι	school educatio	n *	
High School Diploma College/ University A Name of College Atten Mills College	nded	school educatio	n *	
High School Diploma College/ University A Name of College Atten Mills College Degree Type / Course	nded e of Study / Major		n *	
	nded e of Study / Major		n *	
 High School Diploma College/ University A Name of College Atter Mills College Degree Type / Course Bachelor of Arts/Double 	nded e of Study / Major		n *	
 High School Diploma College/ University A Name of College Atten Aills College Degree Type / Course Bachelor of Arts/Double Degree Awarded? 	nded e of Study / Major		n *	
 High School Diploma College/ University A Name of College Atten Aills College Degree Type / Course Bachelor of Arts/Double Degree Awarded? Yes O No 	nded e of Study / Major Major: Ethnic Studies, F		n *	

Degree Type / Course of Study / Major
Master of Public Administration
Degree Awarded?
⊙ Yes ⊖ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
⊙ Yes ⊖ No
Other schools / training completed:
Course Studied
Hours Completed
Certificate Awarded?
⊙ Yes ⊙ No
Board and Interest
Which Boards would you like to apply for?
Workforce Development Board: Not Submitted
Seat Name
Representative of Business
Have you ever attended a meeting of the advisory board for which you are applying?
⊙ Yes ∩ No
If you have attended, how many meetings have you attended?
3

Please explain why you would like to serve on this particular board, commitee, or commission.

As a Manager of Community and Government Relations for Kaiser Permanente I am committed to working collaboratively to create solutions to our communities most pressing needs. As a representative of one of the County's largest employers, I am seeking to foster a more collaborative partnership with the County. I believe that my representation of the health sector on the Board will enhance the Board's mission to align a variety of resources and organizations. Kaiser Permanente is committed to investing in the communities we serve and participating on the Board would allow me to support that mission. I am particularly interested in partnering to address workforce needs in the health care industry. I would be honored to be a part of the amazing work that the Board is already doing to shape and strengthen local and regional workforce development efforts.

Qualifications and Volunteer Experience

I would like to be considered for appointment to other advisory boards for which I may be qualified.

⊙ Yes ⊙ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board, commission, or committee?

⊙ Yes ⊙ No

List any volunteer or community experience, including any advisory boards on which you have served.

Class Representative- Mills College Alumnae Association Board Member- Delta Science Center Board Commissioner- City of Concord Human Relations Commission

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

Please see attached resume and LinkedIn:

2019.12.20.Kaiser_Resume.pdf Upload a Resume

Conflict of Interest and Certification

Do you have a Familial or Financial Relationship with a member of the Board of Supervisors?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Do you have any financial relationships with the County such as grants, contracts, or other economic relations?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Please Agree with the Following Statement

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and undersand that all information in this application is publicly accessible. I understand that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

I Agree



Please return completed applications to:

Clerk of the Board of Supervisors 651 Pine St., Room 106 Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

Contra

Costa

County

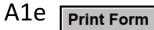
First Name		Last Name					
Laura		Trevino					
Home Address - Street	City		Zip	o Code			
Phone (best number to reach you)		Email					
Resident of Supervisorial District:							
EDUCATION Check appropriate b	ox if you possess	one of the following:					
High School Diploma		Proficiency Certificate		G.E.D. Certificate			
Colleges or Universities Attended	Course of Study	-	Degree Awar				
Los Medanos Community College		ss Administration					
	Dusine	337/4/11/13/14/01	□ Yes				
			□ Yes				
Other Training Completed:							
Board, Committee or Commission Name		Seat Name					
Workforce Board							
Have you ever attended a meeting of the a	advisory board fo	or which you are applyi	ng?				
🖬 No 🛛 Ye	s If yes, how	many?					
Please explain why you would like to serve	e on this particul	ar board, committee, o	r commission				
Resident of the community Genuinely concerned about getting people back to work Excited about being part of the solution Interested in networking with other like-minded individuals. Always appreciate an environment that fosters opinions and encourages feedback.							
Describe your qualifications for this appoi your resume with this application		you may also include a c	opy of				
Recruiter in Contra Costa County for almost 20 years – firsthand knowledge of people in the job market. What they are looking for, challenges they have in getting a job, expectations from their employers. Have friends in the staffing industry, small business and education sector							
I am including my resume with this applica Please check one:		No					
		No					
I would like to be considered for appointm Please check one:		visory bodies for which No	l may be qual	ified.			

-	Please check one:	appointed to a Contra Costa County adv Yes INO Ence, including any boards on which yo	-	
		he Contra Costa Food bank in Cor		
·	the relationships listed below of Please check one:	Yes 📕 No		r to
Do you na	other economic relationships?	l Yes 🔳 No	s, or	
knowledg applicatic cause for	e and belief, and are made in goo on is publicly accessible. I understa	e in this application are true, complete, a od faith. I acknowledge and understand t and and agree that misstatements and/c board, committee, or commission in Cor	hat all info or ommissic ntra Costa (rmation in this ons of material fact may
Signed:	Submit this application to:	Clerk of the Board of Supervisors 651 Pine St., Room 106 Martinez, CA 94553	_Date:	514/2020
		P Contact the Clerk of the Board at (925) . lerkofTheBoard@cob.cccounty.us	335-1900 о	r by email at
1. This appli Code §6250		Important Information to it is a public document and is subject to the Ca	lifornia Public	Records Act (CA Government
2. All memb	ers of appointed bodies are required to t	take the advisory body training provided by Contra	a Costa Count	y.
	s of certain boards, commissions, and cor nd 2) complete the State Ethics Training	mmittees may be required to: 1) file a Statement o Course as required by AB 1234.	of Economic li	nterest Form also known as a
4. Meetings	may be held in various locations and sor	me locations may not be accessible by public trans	sportation.	
5. Meeting	dates and times are subject to change an	d may occur up to two (2) days per month.		

6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

7. As indicated in Board Resolution 2011/55, a person will not be eligible for appointment if he/she is related to a Board of Supervisors member in any of the following relationships: mother, father, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, great-granddaughter, first-cousin, husband, wife, father-in-law, mother-in-law, daughter-in-law, stepson, stepdaughter, sister-in-law, brother-in-law, spouse's grandmother, spouse's grandfather, spouse's gra

8. A person will not be eligible to serve if the person shares a financial interest as defined in Government Code §87103 with a Board of Supervisors Member.



Please return completed applications to:

Contra Costa County Clerk of the Board of Supervisors 651 Pine St., Room 106 Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

First Name		Last Name					
Leslay		Choy					
Home Address - Street	City		Zij	o Code			
Phone (best number to reach you)		Email	· <u> </u>				
Resident of Supervisorial District:	1						
EDUCATION Check appropriate b	ox if you possess	one of the following:					
High School Diploma		Proficiency Certificate		G.E.D. Certificate			
Colleges or Universities Attended	Course of Stud		Degree Awa				
CSU, Chico		nal Relations/French	Yes				
Universite Catholique de Louvain-la-Neuve		ational Relations	Yes				
	Intern		□ Yes				
Other Training Completed:							
Board, Committee or Commission Name		Seat Name					
Workforce Development Board of Contra Costa		Economic Development					
Have you ever attended a meeting of the a	advisory board f	or which you are applyi	ng?				
🗆 No 🔳 Ye	s If yes, how	/ many?	10				
Please explain why you would like to serv	e on this particu	lar board, committee, o	r commission				
As executive director of an economic development corporation working with government, businesses, workforce and the community, I am deeply vested in the work of the CCWDB. I am interested in learning from colleagues from across sectors throughout the county as we work to situate the county more favorably in a post-COVID-19 world, which will require strong partnership, trust and collaboration.							
Describe your qualifications for this appoi your resume with this application		you may also include a c	opy of				
I am currently a member of the Busines restructure, I was a CCWDB board mer Contra Costa County, and have been a profit and large nonprofit, including som at Kaiser Permanente. I believe deeply demonstrates that. I'm a good thought p	nber. I have spe resident of CC e associate and in partnership a	ent the past eight years C since 1995. My back alyst investment bank v and are progress to dat	s in economic ground inclu work and pro e in West Co	c development in des private for ject management punty			
I am including my resume with this application of the second seco		No					
I would like to be considered for appointn Please check one:		visory bodies for which No	l may be qual	ified.			

Are you currently or have you ever been apported on the second se		sory board	1?
List any volunteer and community experience		u have serv	ved.
Listed immediately above - BED Committee (current) - CCWDB (2014-2015)			
Do you have a familial relationship with a men the relationships listed below or Re Please check one: If Yes, please identify the nature of	esolution no. 2011/55) s 🛛 🔳 No	Please refe	r to
Do you have any financial relationships with t other economic relationships?	he county, such as grants, contracts	, or	
Please check one: If Yes, please identify the nature of		sub-recipient to CCWC	WIOA grant & AB 109 Housing grant; no contracts with the County
I CERTIFY that the statements made by me in the knowledge and belief, and are made in good far application is publicly accessible. I understand cause forfeiture of my rights to serve on a boar	ith. I acknowledge and understand t and agree that misstatements and/o	hat all info r ommissio	rmation in this
Signed:		Date:	05/07/20
Submit this application to:	Clerk of the Board of Supervisors 651 Pine St., Room 106 Martinez, CA 94553		
Questions about this application? Con		335-1900 c	or by email at
	fTheBoard@cob.cccounty.us Important Information		
1. This application and any attachments you provide to it Code §6250-6270).		ifornia Public	c Records Act (CA Government
2. All members of appointed bodies are required to take t	he advisory body training provided by Contra	i Costa Count	ty.
3. Members of certain boards, commissions, and commit Form 700, and 2) complete the State Ethics Training Cours		f Economic I	nterest Form also known as a

4. Meetings may be held in various locations and some locations may not be accessible by public transportation.

5. Meeting dates and times are subject to change and may occur up to two (2) days per month.

6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

7. As indicated in Board Resolution 2011/55, a person will not be eligible for appointment if he/she is related to a Board of Supervisors member in any of the following relationships: mother, father, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, great-granddaughter, first-cousin, husband, wife, father-in-law, mother-in-law, daughter-in-law, stepson, stepdaughter, sister-in-law, brother-in-law, spouse's grandmother, spouse's grandfather, spouse's gra

8. A person will not be eligible to serve if the person shares a financial interest as defined in Government Code §87103 with a Board of Supervisors Member.

Application Form

Profile				
Kally		Sabalin		
Kelly First Name	Middle Initial	Schelin Last Name		
Home Address			Suite or Apt	
City			State	Postal Code
			olato	
Primary Phone				
Email Address				
Which supervisorial district d	lo you live in	?		
District 5				
Education				
Select the option that applies	to your high	school educatior	ז *	
High School Diploma				
College/ University A				
Name of College Attended				
Duke University				
	h//Meier			
Degree Type / Course of Stud	iy / wajor			
Master of Divinity				
Degree Awarded?				
⊙ Yes ∩ No				
College/ University B				
Name of College Attended				
Westmont College				

Degree Type / Course of Study / Major
Bachelor of Arts in Philosophy
Degree Awarded?
⊙ Yes ∩ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
O Yes O No
Other schools / training completed:
Course Studied
Hours Completed
Certificate Awarded?
⊙ Yes ⊙ No
Board and Interest
Which Boards would you like to apply for?
Workforce Development Board: Submitted
Seat Name
Board Member (Education)
Have you ever attended a meeting of the advisory board for which you are applying?
⊂ Yes ⊙ No
If you have attended, how many meetings have you attended?

Please explain why you would like to serve on this particular board, commitee, or commission.

I have a deep passion for empowering individuals and communities through practical education and innovative workforce development programs. I believe that this can best be accomplished through robust public-private partnerships that systematically leverage the expertise of educational agencies, industry, and public organizations. In my role as Associate Vice Chancellor of Educational Services at the Contra Costa Community College District (CCCCD), I oversee the workforce development unit at the district level, as well as support the workforce development departments at each of the District's three colleges. I am committed to deepening the partnership that already exists between CCCCD and the Workforce Development Board of Contra Costa County.

Qualifications and Volunteer Experience

I would like to be considered for appointment to other advisory boards for which I may be qualified.

○ Yes ⊙ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board, commission, or committee?

○ Yes ⊙ No

List any volunteer or community experience, including any advisory boards on which you have served.

Member of the SparkPoint Steering Committee (March 2016 - Present) Board Member on the Richmond Workforce Development Board (March 2017 - March 2020) Board Member on the Kerr-Tar Workforce Development Board in Person County, North Carolina (July 2012 - June 2014)

Describe your gualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

I have 12 years of workforce development experience in the higher education arena, ranging from roles as an essential skills instructor, WIOA Case Manager, Dean of Workforce Development, and Associate Vice Chancellor of Educational Services overseeing Workforce Development for the Contra Costa Community College District. I also bring experience serving as a board member on two other workforce development boards with a combined tenure of five years.

K.Schelin Resume 6-1-2020.doc Upload a Resume

Conflict of Interest and Certification

Do you have a Familial or Financial Relationship with a member of the Board of Supervisors?

○ Yes ○ No

Do you have any financial relationships with the County such as grants, contracts, or other economic relations?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Please Agree with the Following Statement

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and undersand that all information in this application is publicly accessible. I understand that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

I Agree

Application Form

Profile					
Stephanie	R	-11-1-1-14-1	Rivera		
First Name	Mid	dle Initial	Last Name		
Home Address				Suite or Apt	
City				State	Postal Code
Primary Phone					
Email Address Which supervisorial di	atriat da vau	livo in	0		
District 4					
Education					
Select the option that a	applies to yo	ur high	school educat	ion *	
High School Diploma					
College/ University A					
Name of College Atten	ded				
University of California Da	avis				
Degree Type / Course	of Study / Ma	ijor			
BS-Public Health					
Degree Awarded?					
⊙ Yes ∩ No					
College/ University B					
Name of College Atten	ded				
University of California Be	erkeley				

Degree Type / Course of Study / Major
MPH-Master of Public Health
Degree Awarded?
⊙ Yes ⊖ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
⊙ Yes ⊙ No
Other schools / training completed:
Course Studied
Hours Completed
Certificate Awarded?
⊙ Yes ⊙ No
Board and Interest
Which Boards would you like to apply for?
Workforce Development Board: Submitted
Seat Name
Have you ever attended a meeting of the advisory board for which you are applying?

⊙ Yes ⊙ No

If you have attended, how many meetings have you attended?

Please explain why you would like to serve on this particular board, commitee, or commission.

John Muir Health is one of the largest employers in Contra Costa County. Historically John Muir Health has hosted the HOSA program and most recently created a robust workforce job shadowing program. Within the last few years, workforce development activities have been transferred to the Community Health Department which I am currently the director. I also work closely with our newly formed John Muir Health Family Practice Residency Programs and co-chair our vulnerable population curriculum rotation. In my role, I am an advocate for our vulnerable populations and workforce development is a critical aspect of economic security. I appreciate your consideration for this position.

Qualifications and Volunteer Experience

I would like to be considered for appointment to other advisory boards for which I may be qualified.

⊙ Yes ⊙ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board, commission, or committee?

○ Yes ⊙ No

List any volunteer or community experience, including any advisory boards on which you have served.

Contra Costa Family Justice Center Board Member Center for Human Development Board Member East Bay Leadership Council-Health Care Task Force Member

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

Will upload a copy of my resume.

Stephanie_Rivera_Resume_2020.doc Upload a Resume

Conflict of Interest and Certification

Do you have a Familial or Financial Relationship with a member of the Board of Supervisors?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Do you have any financial relationships with the County such as grants, contracts, or other economic relations?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Please Agree with the Following Statement

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and undersand that all information in this application is publicly accessible. I understand that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

I Agree

Application Form

Profile				
Corry First Name	Middle Initial	Kennedy Last Name		
Home Address			Suite or Apt	
City			State	Postal Code
Primary Phone				
Email Address				
Which supervisorial dis	strict do you live in	?		
None Selected				
Education				
Select the option that a	pplies to your high	school educatio	n *	
High School Diploma				
College/ University A				
Name of College Attend	ded			
University of Saskatchewa	เท			
Degree Type / Course of	of Study / Major			
Bachelor of Arts - Psychol	ogy			
Degree Awarded?				
⊙ Yes ∩ No				
College/ University B				
Name of College Attend	ded			
Degree Type / Course o	of Study / Major			

Degree Awarded?
c Yes ⊙ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
⊙ Yes ⊙ No
Other schools / training completed:
Course Studied
British Columbia Institute of Technology
Hours Completed
HR Management Diploma (1 year)
Certificate Awarded?
⊙ Yes ∩ No

Board and Interest

Which Boards would you like to apply for?

Workforce Development Board: Submitted

Seat Name

Have you ever attended a meeting of the advisory board for which you are applying?

⊙ Yes ⊙ No

If you have attended, how many meetings have you attended?

Please explain why you would like to serve on this particular board, commitee, or commission.

As a resident of the community and working for a major employer in the region, I am interested in learning more about the county's challenges and use my experience in Human Resources to contribute and collaborate on future opportunities.

Qualifications and Volunteer Experience

I would like to be considered for appointment to other advisory boards for which I may be qualified.

⊙ Yes ⊙ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board, commission, or committee?

⊙ Yes ⊙ No

List any volunteer or community experience, including any advisory boards on which you have served.

As part of the Refinery's Leadership Team and a member of Chevron's Women in Progress Group, I've had the opportunity to volunteer with several programs in Contra Costa County. In particular, I've enjoyed being able to introduce youth to STEM opportunities available to them and participate in interview preparation with the Regional Occupational Program. As we hope to hire locally, I believe these programs are an investment in our future workforce.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

Early in my career I worked for non-profit and public sector employers in the field of HR in Canada. For the last 12-plus years, I've served in several Chevron HR roles both in California and Canada and have seen various regional workforce development approaches. Because we're a large employer and require a skilled workforce, we support workforce development where we operate. I believe we can continue to make progress with partnership with communities to help close technology skills gaps, modernize training and contribute to a culture dedicated to our shared values such as safety and diversity and inclusion. I'd like to share any learnings that may help with the future opportunities of the county's workforce development.

Upload a Resume

Conflict of Interest and Certification

Do you have a Familial or Financial Relationship with a member of the Board of Supervisors?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

I do not have any personal financial relationships with the County. My employer, Chevron, currently provides funding (not at my direction) in support of the County's Regional Occupational Program and STEM programs affiliated with the WCCUSD.

Do you have any financial relationships with the County such as grants, contracts, or other economic relations?

⊙ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Please Agree with the Following Statement

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and undersand that all information in this application is publicly accessible. I understand that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

I Agree



BOARD MEMBERS PUBLIC ROSTER

Name	Seat #	Appointment Date	District # (Resident)	Term End Date	Title	Entity	District # (Employment)	Committee
Michael McGill (Pending F&HS Committee Approval)	1	3/29/2016	District #2	6/30/2020	Chairperson/Engineer	MMS Design Associates	District #2	
Joshua Aldrich	2	10/9/2018	District #3	6/30/2022	CEO	Del Sol NRG. Inc.	District #3	
Yolanda Vega (Pending F&HS Committee Approval)	3		Distrtict #2	6/30/20XX	Principal	Peak Performance Corporate Training	District #2	
Terry Curley	4	10/9/2018	District #2	6/30/2022	Executive Vice President	United Business Bank	District #4	
Tom Guarino (Pending Executive Committee Approval	5		District #X	6/30/20XX	East Bay Public Affairs Team	PG &E	Disttict #	
Jose Carrascal (Vacant July 1, 2020)	6	3/29/2016	District #3	6/30/2020		Corteva Agriscience	District #5	
Stacy Marshall (Pending F&HS Committee Approval)	7		District #X	6/30/20XX				
Carolina Herrera (Pending Executive Committee Approval)	8		District #4	6/30/20XX		Kaiser Permanente	District #	
Robert Muller	9	3/12/2019	District #5	6/30/2023	Learning Manager	PBF Energy	District #5	
Laura Trevino (Pending Executive Committee Approval)	10		District #5	6/30/20XX		Coast Personal Services	District #5	
Stephanie Rivera (Pending Executive Committee Approval)	11		District #X	6/30/20XX		John Muir Health	District #	
Romina Gonzalez (Resigned 05.21.2020)	12	3/12/2019	District#4	6/30/2023	Publlic Relations	Dolan's Lumber Doors & Windows	District #4	
Corry Kennedy (Pending Executive Committee Approval)	13		District #4	6/30/20XX		Chevron	District#2	
Name	Seat #	Appointment Date		Term End Date	Title	Entity		
Thomas Hansen	1	10/17/2017		6/30/2021	Business Manager	IBEW Local 302	District #5	
Joshua Anijar	2	12/10/2019		6/30/2023	Executive Director	Centra Labor Council Contra Costa County	District #5	
Steve Older (Vacant July 1 ,2020)	3	3/29/2016	District #4	6/30/2020	Registered Apprentiship/Area Director	Intl. Assoc. of Machinist & Aerospace Workers, AFL-CIO, District 190	District #5	
Vacant	4		District #X	6/30/20XX				
Vacant	5		District #X	6/30/20XX				
Name	Seat #	Appointment Date		Term End Date	Title	Entity		
G. Vittoria Abbate	1	10/17/2017	District #2	6/30/2021	Director, College & Career & Adult Education	Mt. Diablo Unified School District	District #4	
Kelly Schelin (Pending Executive Committee Approval)	2		District #5	6/30/20XX		Contra Costa College	District #X	
Name	Seat #	Appointment Date		Term End Date	Title	Entity		
Kwame Reed (Pending F&HS Committee Approval)	1		District #X	6/30/20XX	Economic & Community Development	City of Antioch	District #X	
Richard Johnson (Pending F&HS Committee Approval)	2		District #4	6/30/20XX	Employment Service/Employment Prog.Manager II	California Employment Development Department	District #4	
Carol Asch (Pending F&HS Committee Approval)	3		District #X	6/30/20XX	Rehabilitation Act of 1973/District Administrator	California Department of Rehabilitation	District #4	
Name	Seat #	Appointment Date		Term End Date	Title	Entity		
Leslay Choy (Pending Executive Committee Approval)	1		District #X	6/30/20XX		San Pablo Economic Development	District#X	
John Montagh <mark>(Resigned 05.15.2020)</mark>	2	6/6/2017	District #X	6/30/2021	Economic Development & Housing Manager	City of Concord	District # 4	

Youth YOUTH COMMITTEE

	BUSINESS	COMMITTEE	
	WORKFORCE & LABOR	Exec	EXECUTIVE COMMITTEE
	EDUCATION AND TRAINING	BED	BUSINESS ECONOMIC & DEV.
	GOVERNMENTAL AND ECONOMIC AND COMMUNITY DEVELOPMENT	Youth	YOUTH COMMITTEE
	FLEX ADDITIONAL MEMBERS	N/A	NOT ASSIGNED
	PENDING APPROVAL/CONFIRMATION		
	VACANT SEAT		
	TERM END DATE		
COMMITTE	E		
Exec	EXECUTIVE COMMITTEE		
BED	BUSINESS & ECONOMIC DEVELOPMENT COMMITTEE		

35



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUN COMMITTEE	AAN SERVICES		4. b.
Meeting Date:	06/22/2020		
<u>Subject:</u>	RECOMMEND Declaration of Vacancy and Appointments to Alcohol and Other Drug Advisory Board		
Submitted For:	FAMILY & HUMAN SERVICES COMMITTEE,		
Department:	County Administrator		
Referral No.:	NA		
Referral Name:	Fatima Mata Sol		
Presenter:	Fatima Matal Sol	<u>Contact:</u>	Fatima Matal Sol; 5-3307

Referral History:

On December 6, 2011 the Board of Supervisors adopted Resolution No. 2011/497 adopting policy governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at large/countywide seats be reviewed by a Board of Supervisors committee. At Large seats on the Alcohol and Other Drugs Advisory Board are assigned to FHS for review and recommendation to the Board of Supervisors.

The Alcohol and Other Drugs Advisory Board provides input and recommendations to the Board of Supervisors and the Health Services Department concerning family and community needs regarding prevention and treatment of alcohol and drug related problems. The mission of the Contra Costa County Alcohol and Other Drugs Advisory Board is to assess family and community needs regarding treatment and prevention of alcohol and drug abuse problems. The board reports their findings and recommendations to the Contra Costa Health Services Department, the Board of Supervisors and the communities they serve. The Alcohol and Other Drugs Advisory Board works in collaboration with the Alcohol and Other Drugs Services of Contra Costa Health Services. The board provides input and recommendations as they pertain to alcohol and other drugs prevention, intervention, and treatment services.

Referral Update:

The Alcohol and Other Drugs Advisory Board's Executive Committee met and are recommending the following actions:

- · Removal of Michael Collins from the Member-at-Large Seat V position due to resignation
- · Removal of Erika Sheranko, Member-at-Large Seat VI position due to resignation
- · Reappoint Jonathan Ciampi, Member-at-Large Seat I for an additional term

Due to the reorganization of the AODAB's structure, there is a need for additional At-Large members to support a broader county geographical representation.

In accordance to the recruitment policy of the Board of Supervisors a media advisory will be

released to recruit potential Board members. Alcohol and Other Drug Services maintains an internal system to monitor countywide geographical and culturally representation.

Recommendation(s)/Next Step(s):

RECOMMEND that the Board of Supervisors:

- ¹. DECLARE a previous vacancy, due to resignation, for the Member-at-Large Seat V on the Alcohol and Other Drug Advisory Board for a term that ends on June 30, 2020;
- ² DECLARE a vacancy, due to resignation, for the Member-at-Large Seat VI seat on the Alcohol and Other Drug Advisory Board for term that expires on June 30, 2022; AND
- ^{3.} REAPPOINT Jonathan Ciampi to the Member-at-Large I seat on the Alcohol and Other Drug Advisory Board for a term expiring on June 30, 2023.

Fiscal Impact (if any):

NA

Attachments

<u>Staff Memo</u> AOD Advisory Board Roster



Contra Costa County Alcohol and Other Drugs Advisory Board 1220 Morello Avenue, Suite 101 Martinez, CA 94553 (925) 335–3307; fax (925) 335–3318

"The mission of the Contra Costa County Alcohol and Other Drugs Advisory Board is to assess family and community needs regarding prevention and treatment of alcohol and other drug-related problems. Resultant findings and recommendations are forwarded to the Health Services Department and the Board of Supervisors. The Board also serves as an advocate for these findings and recommendations to the communities that we serve."

Date:	June 16, 2020
From:	Fatima Matal Sol, Staff contact for the Alcohol and Other Drugs Advisory Board
RE:	Alcohol and Other Drugs Advisory Board (AODAB)– At Large Appointments
To:	Family and Human Services Committee, Contra Costa Board of Supervisors

District I Antwon Cloird

District 2 Catherine Taughinbaugh

District 3 Cynthia Chavez

District 4 Tom Aswad

District 5 Logan Campbell

At- Large Member

Jonathan Ciampi Victor Ortiz Talia Moore E.D.D Guita Bahramipour Michael Collins Erika Sheranko

At- Large Alternate

Evelyn Howard Vacant Vacant The Alcohol and Other Drugs Advisory Board's Executive Committee met and are recommending the following actions:

- Removal of Michael Collins from the Member-at-Large Seat V position due to resignation
- Removal of Erika Sheranko, <u>Member-at-Large Seat VI</u> position due to resignation
- Reappoint Jonathan Ciampi, <u>Member-at-Large Seat I</u> for an additional term

Due to the reorganization of the AODAB's structure, there is a need for additional At-Large members to support a broader county geographical representation. In accordance to the recruitment policy of the Board of Supervisors a media advisory will be released to recruit potential Board members. Alcohol and Other Drug Services maintains an internal system to monitor countywide geographical and culturally representation. Should you have any questions, please contact me at:

Phone:925-335-3307Email:Fatima.MatalSol@hsd.cccounty.us

Thank you in advance for your time and consideration regarding this matter.

Current AODAB Representation		
Seat	Name	Address
District I	Antwon Cloird	Richmond, CA, 94804
District II	Catherine Taughinbaugh	Danville, CA, 94526
District III	Cynthia Chavez	Antioch, CA, 94531
District IV	Tom Aswad	Walnut Creek, CA, 94598
District V	Logan Campbell	Martinez, CA, 94553
At Large - 1	Jonathan Ciampi	San Ramon, CA, 94583
At Large - 2	Victor Ortiz	Walnut Creek, CA, 94598
At Large - 3	Talia Moore E.D.D	El Sobrante, CA, 94803
At Large - 4	Guita Baharmipour	Moraga, CA 94556
At Large - 5	Michael Collins	Oakley, CA, 94561
At Large - 6	Erika Sheranko	Antioch, CA, 94531
At Large - Alternate 1	Evelyn Howard	Alamo, CA 94507
At Large - Alternate 2	Vacant	
At Large - Alternate 3	Vacant	

AODAB Member Reappointment		
Name	Address	
Jonathan Ciampi	San Ramon, CA	

pointed Members per District of Residence		
District I	1	
District II	1	
District III	1	
District IV	1	
District V	1	

Total Members per District of Residence		
District I	2	
District II	3	
District III	2	
District IV	2	
District V	1	

District of Residence



Contra Costa County Board of Supervisors

Subcommittee Report

5.

FAMILY AND HUMAN SERVICES COMMITTEE

Meeting Date:	06/22/2020	
<u>Subject:</u>	CONSIDER a report of the SNAP/CalFresh Prog County	ram in Contra Costa
Submitted For:	David Twa, County Administrator	
Department:	County Administrator	
<u>Referral No.:</u>	103	
<u>Referral Name:</u>	SNAP/CalFresh Update	
Presenter:	Kathy Gallagher	<u>Contact:</u>

Referral History:

The SNAP Program was originally referred to the Family and Human Services Committee by the Board or Supervisors on February 15, 2011. This program was formerly known as Food Stamps and is currently known as the Federal Supplemental Nutrition Assistance Program (SNAP). In California, the name of the program is CalFresh. EHSD has presented periodic status reports to the FHS related to concerns about extended wait times for benefits and the anticipated impact of the expansion of CalFresh benefits to SSI (Supplemental Security Income/Supplementary Payments) recipients effective June 1, 2019. FHS received status reports on September 24 and December 3, 2018; and on April 22, June 10, July 29, and September 23, 2019. Kathy reported that CalFresh applications were beginning to level off at about 2,700 per month as compared to 2,200 per month prior to the SSI expansion. EHSD also presented a status report directly to the Board of Supervisors on July 9, 2019. In November 2019, Kathy Gallagher and Rebecca Darnell updated the FHS Committee.

Referral Update:

Please see attached report from EHS Director Kathy Gallagher providing an update on the department's implementation of the CalFresh benefits expansion, the department's CalFresh Outreach Plan, and staffing needs.

Recommendation(s)/Next Step(s):

ACCEPT status report from the Employment and Human Services Department on the department's implementation of the CalFresh benefits expansion, and its CalFresh Outreach Plan and staffing needs.

Fiscal Impact (if any):

NA



Contra Costa County Employment and Human Services Department

CalFresh Report

Family and Human Services Committee June 22, 2020 **Caller Fresh** Introduction & Facts:

CalFresh provides **food for low-income families**, one of the most important anti-poverty programs in the country.

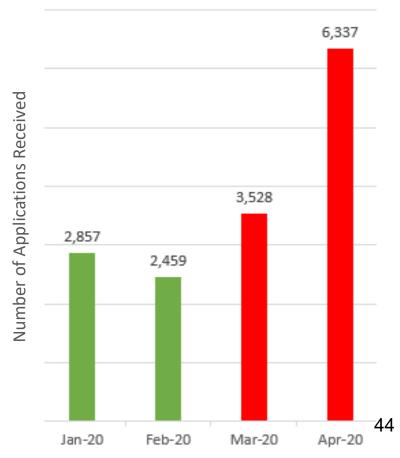




Average monthly benefit of \$192 rose to \$318 during the COVID 19 Crisis

Contra Costa County receives an average of 3,117 applications monthly. During the COVID 19 Crisis, the average has risen to 4,932 application s monthly.

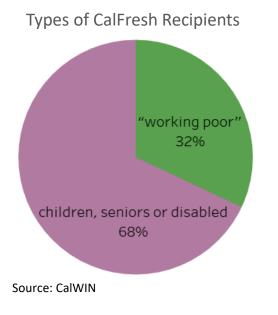
CalFresh Applications by Month, January – April 2020



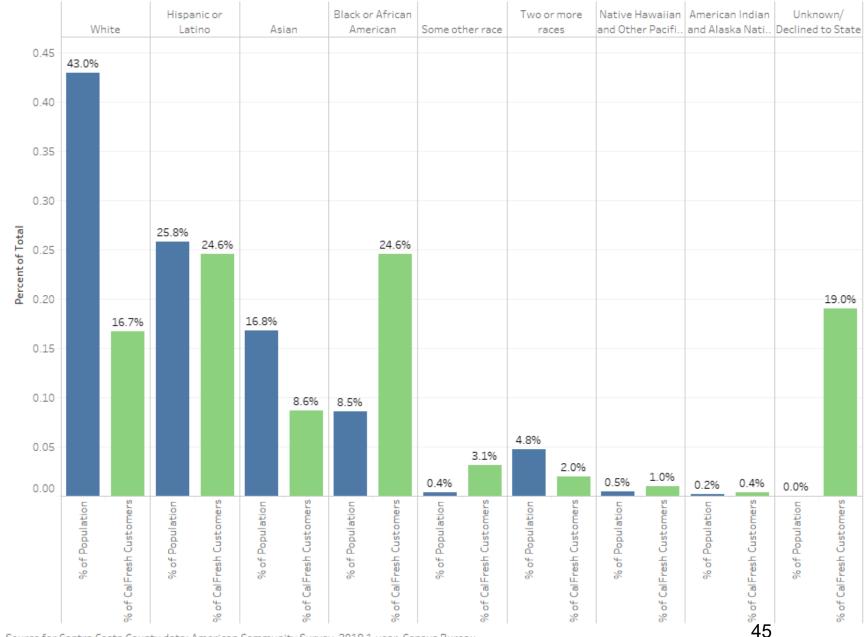
Source: CalWIN



An average of 65,000 individuals (currently **73,000 individuals**) receive CalFresh benefits monthly in Contra Costa County.

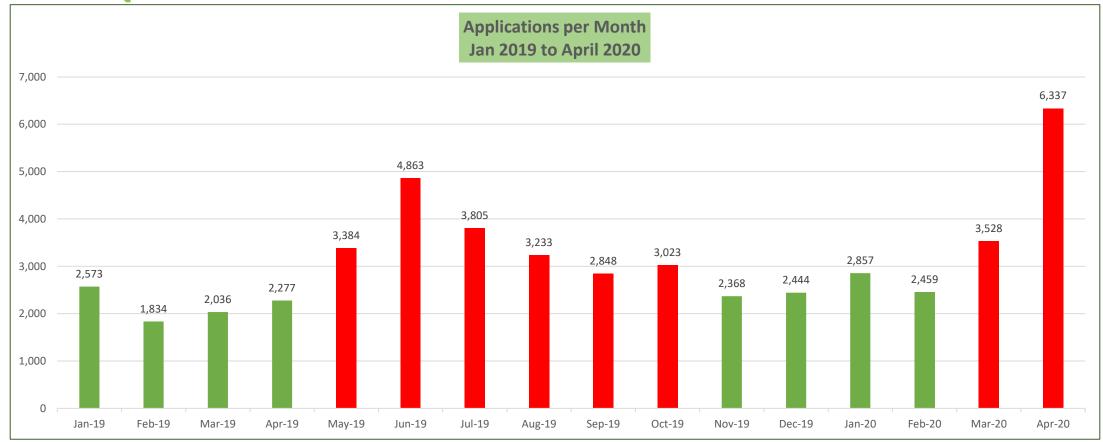


Contra Costa County Population and CalFresh Customers by Race/Ethnicity



Source for Contra Costa County data: American Community Survey, 2018 1-year, Census Bureau

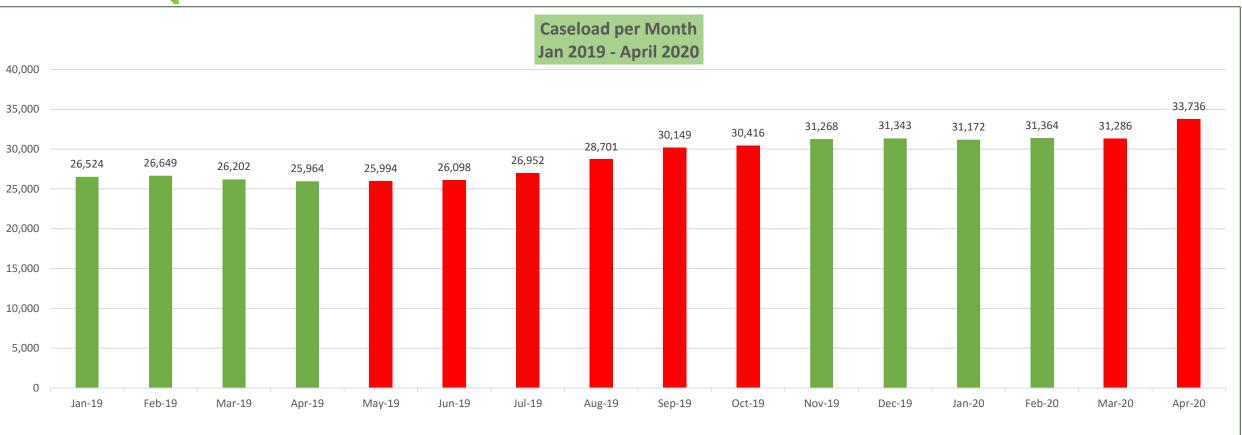




From January 2019 through April 2020, an average of approximately 3,117 applications were submitted monthly. In May 2019, newly eligible SSI (Social Security Income) recipients began applying for benefits (noted above in red). This programmatic change is also known as CalFresh Expansion. March and April 2020 are also in red noting the COVID 19 crisis.



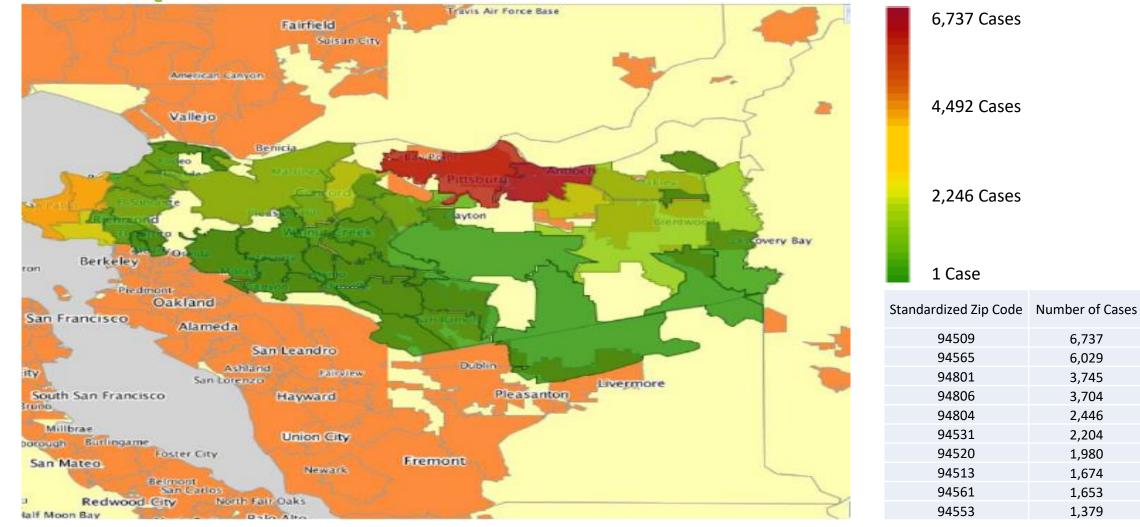
Caseload



From January 2019 through April 2020, the CalFresh caseload average was 28,989 monthly. In May 2019, newly eligible SSI (Social Security Income) recipients began applying for benefits (noted above in red). This programmatic change is also known as CalFresh Expansion. March and April 2020 are also in red noting the COVID 19 crisis.

Source: CalWIN

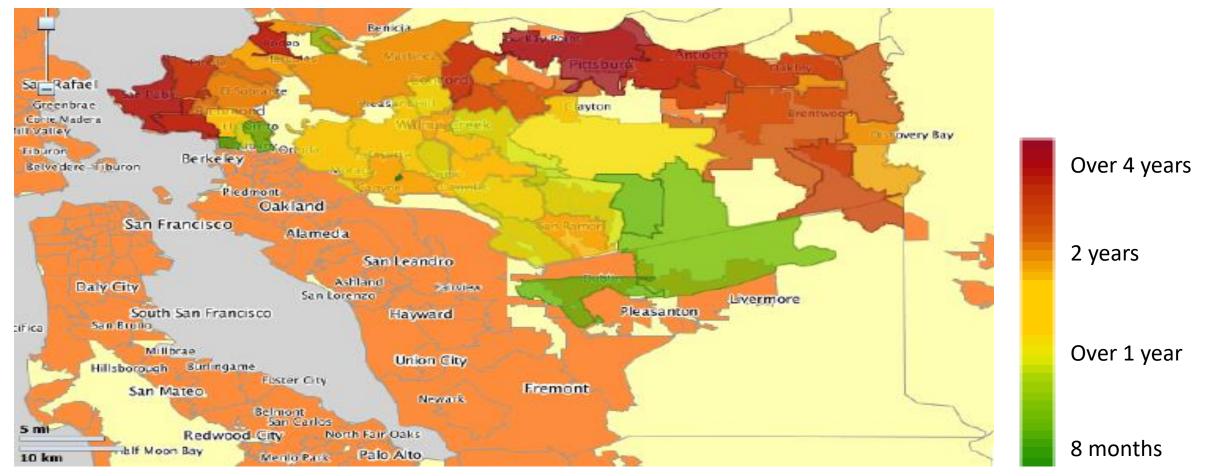




Source: CalWIN Business Intelligence



Length of Time Receiving



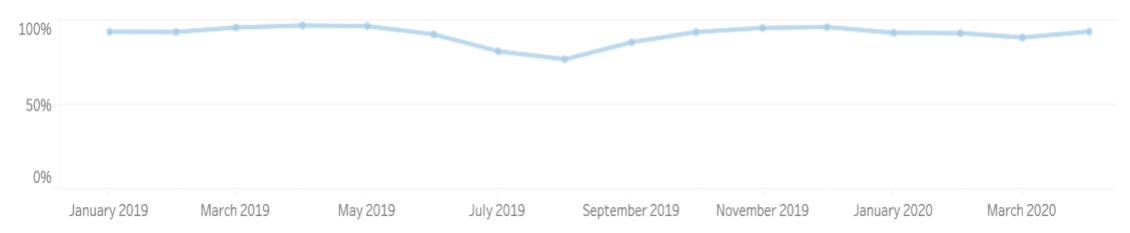
Source: CalWIN Business Intelligence



Workforce Services Bureau Staffing

- Hiring Update
- COVID 19 Impacts

Applications Approved within 30 Days



Source: CalFresh Monthly Caseload Movement Statistical Report (CF 296)



Service Delivery Updates

- > Call center established for phone applications using telephonic signature
- Intake and recertification interviews continue telephonically
- Expanded use of Adobe Sign for remote document signature
- Temporary Waivers, Postponements and Benefit Expansion Due to COVID 19
 - Recertification postponements and no negative actions through May 2020
 - > Emergency CalFresh benefits bring families up to maximum household benefit through June
 - Interview waivers allowed on some applications
 - > Pandemic EBT for eligible households with school aged children
 - > Able-Bodied Adults Without Dependents work requirements waived through public health emergency
 - Online EBT purchases through Amazon and WalMart
- SSI and Senior Outreach
 - Mailings not very fruitful but continue
 - Community outreach stopped due to COVID 19



- Voluntary program that launched in April 2017 in partnership with the Foundation of California Community Colleges (FCCC).
- Provides comprehensive employment support, including job training, soft skills, employment application assistance, skill development, interview skills
- > As of April 2020, 67 individuals are participating in Fresh Success in Contra Costa County.
- Current service delivery partners*:
 - Rubicon
 - Opportunity Junction
 - Diablo Valley College (DVC)

*Providers currently provide services to the CalFresh population via teleconference, video conferencing and phone calls.



EHSD is committed to community partnership to address food insecurity in Contra Costa County.

CalFresh Partnership Group includes:

- Food Bank of Contra Costa and Solano
- Ensuring Opportunity Campaign to End Poverty in Contra Costa
- Family Economic Security Partnership (FESP)/First 5
- Multi-Faith ACTION Coalition
- Community Clinic Consortium of Contra Costa and Solano

Feeback informed outreach materials, phone application expansion.



Questions?



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

6.

Meeting Date:	06/22/2020		
<u>Subject:</u>	HIV Prevention Needle Exchange Program Policy Update		
<u>Submitted For:</u>	David Twa, County Administrator		
Department:	County Administrator		
<u>Referral No.:</u>	61		
<u>Referral Name:</u>	HIV Prevention Needle Exchange Program		
Presenter:	Jessica Osorio <u>Contact:</u> Jessica Osorio 3-6787		

Referral History:

The HIV Prevention/Needle Exchange program was referred to the Family and Human Services Committee (F&HS) in October 2002. The issue was discussed four times during 2003 and was subsequently closed. The referral was then re-opened on January 4, 2005 for annual reports to F&HS. During the December 18, 2014 F&HS meeting, Health Services Department staff were directed to begin reporting to F&HS bi-annually regarding Referral #61 - HIV Prevention/Needle Exchange Program and to submit a report directly to the Board of Supervisor in the intervening years. On December 14, 2015 F&HS received a report on the program and recognized the incidents of HIV and AIDS has significantly decreased. Therefore, F&HS felt that a bi-annual report to the Committee was sufficient. The Committee also advised staff to return to them at any time should the exposure data significantly change. The Family and Human Services Committee last received a report on this program on November 8, 2017.

Referral Update:

Please see the attached report for an update on needle exchange prevention and services.

Recommendation(s)/Next Step(s):

ACCEPT the Report from the Health Services Department on needle exchange prevention as part of a comprehensive approach to reduce transmission of HIV in Contra Costa County; and

DIRECT staff to forward the report to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is no fiscal impact, the report is informational.

Attachments

<u>Needle Exchange Program Report</u> <u>Needle Exchange Program - Needs-based Distribution Model</u>

RECOMMENDATIONS

- 1) Accept this report on needle exchange as part of the comprehensive prevention program to reduce transmission of HIV in Contra Costa County.
- 2) Direct the Health Services Department to continue supporting and monitoring sterile needle exchange services and adopt a modified "needs-based" distribution exchange model with built-in incentives to return used needles (see document titled "Needle Exchange Recommendation to Change Model for Family & Human Services Committee").

GLOSSARY

Terms currently used to discuss needle exchange services include:

- □ Sterile needle/syringe *instead* of clean needle/syringe.
- □ Used needle/syringe *instead* of dirty needle/syringe.
- □ People who inject drugs (PWID) *instead* of Injection Drug Users (IDUs).
- □ One-for-one exchange model involves exchanging one sterile needle/syringe for a used one, the individual cannot get any additional needles/syringes.

<u>SUMMARY</u>

In 2006, the Contra Costa Board of Supervisors:

- Terminated the local State of Emergency first declared on December 14, 1999.
- Authorized the Health Services Department to administer a clean needle and syringe exchange project pursuant to Health and Safety Code section 121349 et seq; and
- Directed the Health Services Director to annually report to the Board on the status of the clean needle and syringe exchange project.

This report satisfies State regulatory requirements to maintain needle exchange services in Contra Costa and covers the period of July 1, 2017 to June 30, 2019.

As of December 2018, 2,756 individuals are living with HIV or AIDS in Contra Costa. Between 2016 and 2018, the percentage of people living with HIV and identifying injection drug use (IDU) as the mode of transmission has dropped from 8% of all those living with HIV to 7%. In addition, we are pleased to report that the percentage of those newly infected with HIV in 2017/2018 identifying IDU as the mode of transmission remained roughly the same as in previous years (3% in 2016 and 3.2% in 2017/2018). This speaks in large part to the importance of having accessible, weekly needle exchange services in Contra Costa County. In our county, needle exchange services are provided through a contract with the HIV Education and Prevention Project of Alameda County (HEPPAC). The Health Department provides an annual amount of \$72,000 from County General Funds to support the weekly operation of needle exchange services in West and East County. While there has been a drop in the number of individuals served, there has been an increase in referrals to health and supportive services and distribution of Narcan, an opioid overdose reversal medication, in these past two fiscal years.

Neither needle exchange nor legislative changes allowing pharmacies to dispense syringes without a prescription have had any apparent negative effect on residents, businesses, or law enforcement in Contra Costa. The availability of needle exchange as part of a comprehensive continuum of services for injection drug users continues to be a necessary public health measure to reduce transmission of blood borne diseases in Contra Costa.

BACKGROUND ON ACCESS TO CLEAN NEEDLES TO REDUCE TRANSMISSION

The California Department of Public Health (CDPH) reports that of the 136,566 people living with HIV/AIDS in California in 2018, 6% identified their risk for HIV as IDU.¹ Further, the CDPH Office of Viral Hepatitis reports that transmission of hepatitis C is primarily through sharing needles, syringes or other drug injection equipment. Lack of access to new, sterile injection equipment is one of the primary risk factors that may lead to sharing of hypodermic needles and syringes, which puts people who inject drugs at high risk for HIV, HCV, and Hepatitis B infection.²

Needle exchange has been an essential component of Contra Costa's strategy to reduce the transmission of HIV attributed to IDU since 1999, when the program operated under the Board's declaration of a State of Emergency to authorize needle exchange services. Health and Safety Code Section 121349.3 removed the requirement for a Declaration of Emergency and current regulations now require only that needle exchange information be provided at an open meeting of the authorizing body every two years.

From 2005-2010, Contra Costa participated in a statewide Disease Prevention Demonstration Project (DPDP) to assess the potential to reduce transmission of HIV by increasing access to sterile needles and syringes. The project evaluation showed lower injection-related risks among people who inject drugs in those counties with syringe exchange programs. Additionally, evaluators of the pilot project found lower levels of unsafe discard of used syringes, no increase in the rate of accidental needle-stick injuries to law enforcement and no increase in rates of drug use or drug-related crime.³

¹ https://www.cdph.ca.gov/

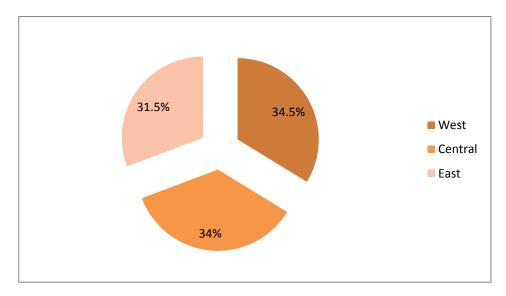
https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/California_HIV_Surveillance_Report2018.pdf

² <u>https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/2018-Chronic-HCV-Surveillance-Report-Exec-Summary.pdf</u>
³ The full report of the evaluation can be accessed on the California Department of Public Health, Office of AIDS website
<u>http://www.cdph.ca.gov/programs/Documents/SB1159StateReportFinal.pdf</u>

As a result of the success of the DPDP, 2011 legislation expanded syringe access through pharmacies throughout the state. Assembly Bill (AB) 1743 (Ting, Chapter 331, Statutes of 2014) further expanded access in January 2015 by allowing customers to purchase and possess an unlimited number of syringes. Participating pharmacies must provide counseling and offer information on safe disposal.

REDUCING TRANSMISSION OF DISEASE

As of December 31, 2018, there were 2,756 individuals reported living with HIV (PLWH) in Contra Costa. Roughly 34% reside in Central County, 34.5% in West County, and 31.5% in East County.⁴





Of all PLWH in Contra Costa, 345 individuals (12%) identify injection drug use or injection drug use among men who have sex with other men as their mode of HIV transmission.⁵ Among new HIV infections in Contra Costa County, the majority of new cases are still attributed to male-to-male sexual contact (MMSC). Between July 1, 2017 and June 30, 2019, of the total new HIV cases (219), 158 (72%) were attributed to MMSC. In these two reporting years, the total number of cases attributed to IDU slightly decreased from 4% to 3%.

⁴ Data Use Agreement (DUA) Q2 2018

⁵ Data from 2018 Data Use Agreement (DUA) Data, Q2 2018.

MATERNAL TRANSMISSION

It often takes two or three months for an accurate diagnosis of HIV or AIDS in a newborn since a positive test at birth may reflect maternal antibodies and not HIV infection. Children with HIV have usual childhood infections more often and more severely than uninfected children and can also be susceptible to the same opportunistic infections as adults with HIV.

Of the 2,756 individuals living with HIV or AIDS in Contra Costa County in 2018, 19 are pediatric cases: the majority are now adults and 3 are children 12 years of age or younger. Identification and treatment of HIV-positive women in prenatal care is nearly universal, but we continue to encounter women who do not seek prenatal care prior to delivery. As an example, in 2016, Contra Costa County had one new case of maternally transmitted HIV. A comprehensive case review completed by the CCRMC Safety and Performance Improvement Committee found that while the woman accessed care quite late in pregnancy, through multiple providers, and was inconsistent in her follow up, several health care systems could have performed better to better to possibly prevent the tragic outcome. Systems changes were proposed and there have been no new subsequent maternal transmission cases reported. Mother and baby are both virally suppressed at this time.

HEPATITIS C

Hepatitis C infection (HCV) is largely attributed to the use of contaminated needles. Chronic HCV can lead to scarring of the liver, cirrhosis, liver failure and/or liver cancer. Across California the number of chronic Hepatitis C carriers continues to be unreliable due to variation in reporting capacities, changes in patient residences and the high volume of duplicated positive lab tests. Consequently, in Contra Costa the Acute Communicable Disease (ACD) program reviews only a fraction of the reports and only follows extremely acute infections and those with a higher likelihood of yielding opportunities for contact intervention and transmission interruption.

EXPOSURE IMPACT ON LAW ENFORCEMENT AND FIRST RESPONDERS

Occupational exposure to needle stick injuries (Chart 2) for first responders remains low. The Communicable Disease Control Program has reviewed reports of exposures and is in the process of transitioning responsibility for most first responder exposure follow up back to the Occupational and Risk Management agencies of the respective departments. Communicable Disease Control remains available for consult as requested and printed materials are also available on our website at <u>http://cchealth.org/aids/syringe-exchange.php</u>.

Three of 35 exposures reported in 2018 were needle stick contacts and two out of 48 exposures reported in 2019 were needle stick contacts. Public Health has received no reports of subsequent HIV infection because of needle stick injury among law enforcement or first responders.

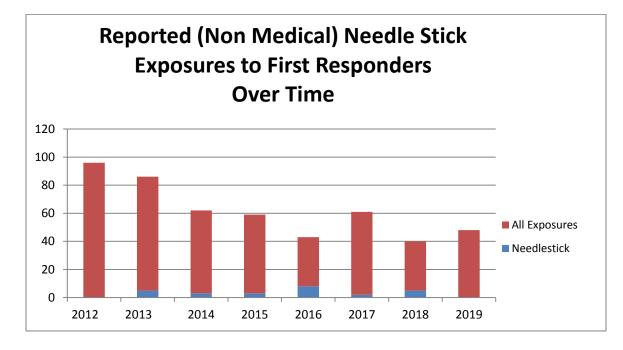


Chart 2: Reported (Non-Medical) Needle Stick Exposures to First Responders over Time

NEEDLE EXCHANGE SERVICES: July 1, 2017- June 30, 2019

All data below is supplied by the needle exchange contractor, HIV Education Prevention Project of Alameda County (HEPPAC). HEPPAC has provided services since 2012.

Needle exchange services in the region rely on a combination of county general funds and other funding secured by the contractor through foundations and other organizations. The budget funds portions of several staff salaries, including Community Health Promoters, a clerk, and the Harm Reduction Services Manager. The budget also funds supplies. HEPPAC's service delivery and reporting continue to improve.

In FYs 2017/18 and 2018/19, HEPPAC continued to notice a drop in the number of clients exchanging needles in West Contra Costa County. While the total number of African American and Latino clients served increased from FY 16/17 to FY 18/19 as shown in Table 1, the total number of needles exchanged by these two subpopulations remained low. One reported observation from HEPPAC is that African Americans tend to take other harm reduction supplies (i.e. cookers, cotton, hygiene/wound care, etc.) instead of sterile needles. Another reason reported is that the physical site where services were being offered needed to be reevaluated to serve a higher percentage of African Americans who inject drugs. The agency responded by searching for new sites in the Richmond/San Pablo area by working with local "gate keepers" to increase utilization by word of mouth to their IDU peers. In late 2019, HEPPAC met with members of the African American Health Conductors to get information on which neighborhoods would be a best fit to restart needle exchange services. The group

decided that the Iron Triangle neighborhood offered the best opportunity to reach individuals who use drugs and come from the African American and Latino communities.

In East County the situation is different: Bay Point sites yield the highest volume of syringe exchanges in Contra Costa County. The average client utilizing East County is a Caucasian male between the ages of 40-49. As demonstrated in Table 1, the percentage of clients who identify as White increased by 24% from FY 17/18 to FY 18/19 and that population continues to be the majority of needle exchange clients in the current fiscal year. The Bay Point site also has identified an increase in the number of participants reporting use of prescription opioid pills, crushed and modified for injection. This trend is reflective of national trends and may be a contributing factor in accidental overdose deaths.

HEPPAC also reports a continuing increase in health and social services referrals from 941 in FY16/17 to 2,179 in FY7/18 and 3,676 in FY18/19. These service increases are attributable to HEPPAC's stronger linkages to health care providers, substance use treatment services, collaborative partnerships with other community agencies and other resources. In addition, in FY 2018/19, HEPPAC established a relationship with Contra Costa Healthcare for the Homeless (HCH) program and for a limited time offered needle exchange services co-located with HCH's Antioch Fulton Shipyard pop up clinic. This coincided with the temporary closure of HEPPAC's west county site. Once the exchange site in the Iron Tringle in Richmond was established, HEPPAC could no longer keep syringe exchange staff at the Antioch Fulton Shipyard site.

In Contra Costa County, the "one-for-one" syringe exchange model continues to be the core operating principle of needle exchange. However, individuals access services for themselves or exchange on behalf of others (these individuals are called "secondary exchangers"). Of the 1,683 individuals (contacts) served in FY 17/18, 1047 (58%) identified as male, 636 (42%) identified as female, and there were no individuals that identified as transgender. In FY 18/19 1559 (61%) identified as male and 974 (39%) identified as female, and there were no individuals that identified as transgender. In FY 18/19 1559 (61%) identified as transgender. In both reporting years, most contacts were served in East County. In FY 17/18 a total of 62% of the contacts were in East County and 38% in West County. In FY 18/19, a total of 56% of the contacts were in East County as compared to 44% in West County. This is vastly different that previous years where close 80% of contacts were served in East County. However, when focusing on needle exchange rates, there are vast differences when looking at region and race/ethnicity.

One important and often overlooked aspect of syringe exchange services programs is the actual disposal of used (formerly known as "dirty") needles. HEPPAC's one-for-one model assures that disposal of used needles occurs every week. Agency staff measure the number of used needles they dispose after every exchange by the size of the biohazard container they bring back to incinerate. HEPPAC uses containers that hold increments of 10, 50, 100, 250, 300, 1200 and 5,000 used syringes. They also provide these containers to clients to take home and bring back full to exchange. If clients bring used needles in other containers, the staff estimates based on the size compared to the biohazard containers. The collection and disposal of used needles occurs on a weekly basis and helps ensure that shared community spaces (i.e. playgrounds, parks, etc.) are free of used needles that may create a public health risk for county residents.

In this reporting period, West County residents exchanged a total of 10,074 used needles in FY 17/18 and 9,969 used needles in FY 18/19 as compared to East County residents that exchanged a total of 247,868 used needles in FY 17/18 and 236,344 in FY 18/19. There are also notable differences in needle exchange rates based on race and ethnicity. In FY 18/19 a total of 1,510 African American individuals were served at needle exchange sites as compared to 2,013 Whites. African American clients exchanged 18,519 used needles as compared to 177,794 by the White clients. Some reasons for the differences in exchange behaviors may be that White clients report exchanging needles for secondary users at a much higher rate than African American clients. In addition, the volume of White clients continues to grow in East County. Overall, the data reported by HEPPAC shows a continued shift toward increasing utilization at the East Contra Costa sites.

Ethnicity Totals Over Time			
	FY 16/17	FY17/18	FY 18/19
African American	85	541	969
White	769	871	1,142
Latino/Hispanic	103	207	346
Native American	2	10	4
Asian/Pacific Islander	4	22	40
Other	1	32	32
Total	964	1,683	2,533

Table 1: Ethnicity Totals Over Time (Needle Exchange Program)

Individuals accessing needle exchange (Chart 3) for themselves alone are reported as "Contacts": the number may contain duplicates.

Exchanging syringes for others is called a secondary exchange. Individuals who exchange for others report the estimated number of individuals for whom they exchange syringes, summarized in Chart 3 below. The overall volume of secondary exchange increased in this reporting period as compared to previous years. Still, the number of secondary exchangers by race and region continues to be the same with White clients in East County accounting for the majority of secondary exchangers reported. Because secondary exchangers attend needle exchange more than once in a year their numbers are duplicated. The number of clients they exchange for is self-reported.

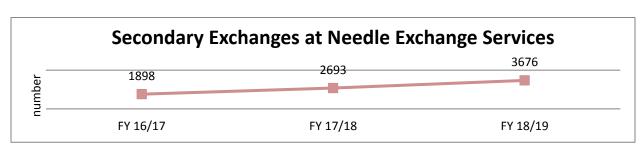
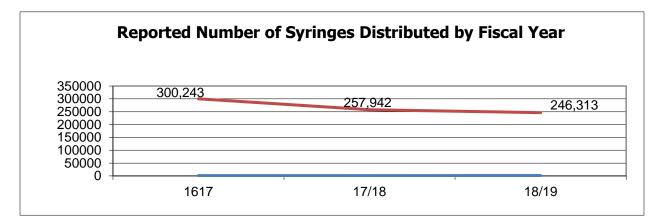


Chart 3: Secondary Exchanges at Needle Exchange Services

Finally, as seen in Chart 4, the total number of syringes exchanged over time has steadily decreased in the past three years.

Chart 4: Reported Number of Syringes Distributed by Fiscal Year



Between 2017-2019, HEPPAC participated in the HIV/AIDS and STD Program's Naloxone Grant Program by helping to distribute a total of 302 overdose prevention kits to individuals most likely to experience or witness opioid overdoses.

Overall, the agency is performing well and will continue to provide services in both East and West Contra Costa on a weekly basis. The Public Health program will continue to monitor service delivery in West County to both assess why the volume of clients has dropped off and determine if other steps are needed to increase performance.

ALCOHOL AND OTHER DRUG SERVICES

Admissions to AODS services (Chart 5) in Fiscal year 18-19 were up by 22.6% from the previous year. The increased enrollment is attributed to several factors, including an expansion of methadone treatment services due to increased admissions for opioid abuse treatment and increased access due to the Affordable Care Act. Admissions are not necessarily unduplicated individuals – one person may enter treatment multiple times during the year depending on the availability of treatment slots.

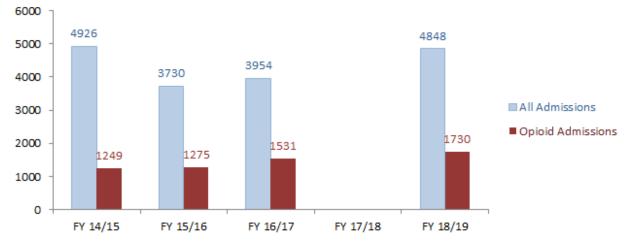


Chart 5: All AODS Admissions and Opioid-Related Admissions*

*Note: FY 17/18 data were not available in time for this report. They are in a different AODS system and request was delayed by COVID-19 response.

Of the 4,848 admissions this past fiscal year, roughly 24% identified injection drug use behavior (Chart 6). The proportion of injection drug users to the overall population in AODS services has been similar year to year over the last several years: FY 15/16 (25%), FY 16/17 (28%), and FY 18/19 (24%).

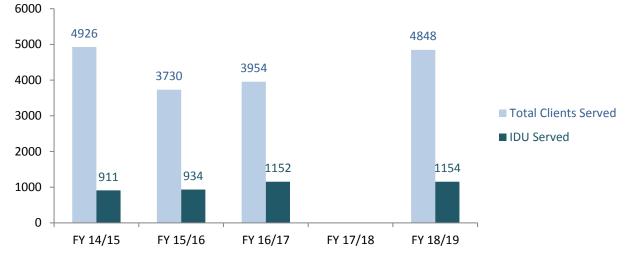


Chart 6: Total Clients Served and IDUs as a Proportion of all AOD Services*

*Note: FY 17/18 data were not available in time for this report. They are in a different AODS system and request was delayed by COVID-19 response.

As seen in Chart 7, the overall percentage of African Americans enrolled in services has increased from 19% of those served in 2017/2018 to 22% of those served in 2018/19. The percentage of Hispanics enrolled in services has remained relatively steady at roughly 27% of those served, and Whites comprise just over half the service enrollees.

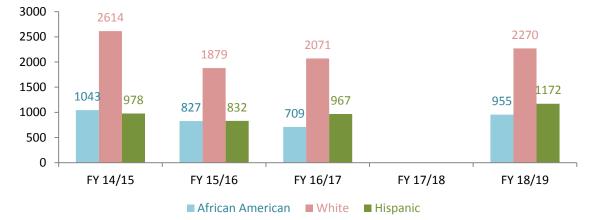


Chart 7: Enrollment in AODS Sites over Time by Primary Race/Ethnicity*

*Note: FY 17/18 data were not available in time for this report. They are in a different AODS system and request was delayed by COVID-19 response.

Nearly 40% of those served in FY 18/19 (Chart 8) are new enrollees.

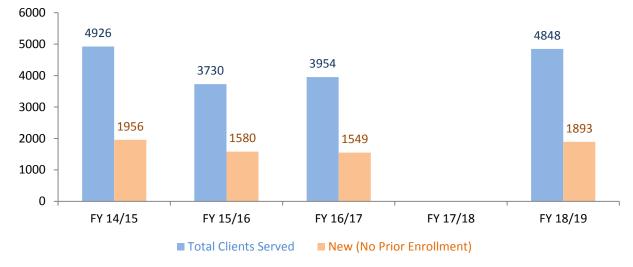


Chart 8: New Enrollees in AODS Services*

*Note: FY 17/18 data were not available in time for this report. They are in a different AODS system and request was delayed by COVID-19 response.

Chart 9 shows a recent increase in enrollees who reported being homeless at the time of service initiation. In FY 2015/16, 26% reported being homeless, in FY 2016/17 21%, and in FY 2018/19, 32% of total clients enrolled reported being homeless.

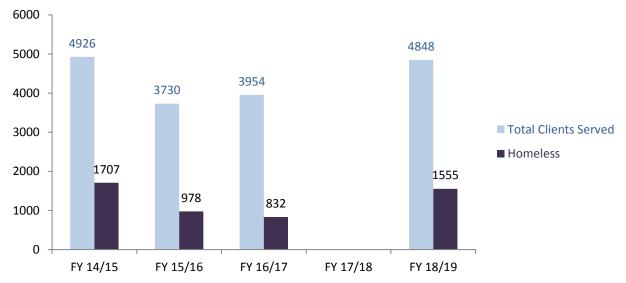


Chart 9: Homeless Proportion of Enrollment in AOD Services*

*Note: FY 17/18 data were not available in time for this report. They are in a different AODS system and request was delayed by COVID-19 response.

OTHER PREVENTION ACTIVITIES FOR INJECTION DRUG USE

Opioid Agonist Therapy

Recent research out of Stanford explored the most effective and cost-effective ways to combat HIV risk among injection drug users. As abuse of prescription opioids rises and as more individuals inject drugs like heroin, the risk of increased blood borne illnesses such as HIV and Hepatitis C also increases. Their investigation of HIV prevention programs for injection drug users revealed that opioid agonist therapy (OAT) options, most commonly methadone and buprenorphine maintenance therapies, are the most cost effective. OAT options can also be highly effective in helping people stop injecting drugs over time. They also found that combining prevention efforts such as needle-syringe exchanges, OAT, Pre-Exposure Prophylaxis (PrEP), and prevention and testing with high-risk negatives have higher rates of success than standalone interventions.⁶

Alameda & Contra Costa County Integrated HIV Prevention & Care Plan

Contra Costa County HIV/AIDS & STD program staff and Consortium members assisted in the development of the regional 2017 - 2021 Alameda & Contra Costa County Integrated HIV Prevention & Care Plan. The plan is used to evaluate care and prevention efforts in both counties. Key prevention components of the plan that focus on injection drug users include:

- Through a collaboration involving the Oakland Transitional Grant Area (OTGA) Planning Council, the Contra Costa HIV Consortium, and the two county health departments, develop an End of AIDS Action Plan for the Oakland TGA that outlines steps to implement a collaborative, multidisciplinary campaign to end HIV in the two-county region, including ending new HIV infections, ending HIV-related deaths, and ending HIV related stigma.
- 2. Continually collect and report data on new HIV diagnoses in the OTGA, including breakdowns by ethnicity, gender, transmission category, and age.
- **3.** Conduct ongoing needs assessments to identify emerging issues related to HIV infection and access to HIV education, testing, and other resources.
- **4.** Deliver targeted, sustained, and evidence-based HIV prevention interventions that are appropriate for high-risk populations.
- 5. Support the development of expanded, tailored, HIV-related stigma reduction campaigns in English and Spanish that are aimed at specific, high-risk subpopulations and are developed in collaboration with consumers; that address stigma related to HIV, homophobia, and HIV risk behaviors; that incorporate cutting-edge social media approaches; and that contain sexpositive messages.
- 6. Utilize targeted social marketing, media, mobilization and condom distribution programs in English and Spanish to raise and sustain awareness of HIV risk.

⁶ https://med.stanford.edu/news/all-news/2017/05/study-identifies-cost-effective-ways-to-combat-hiv-risk.html

7. Ensure widespread, accessible, and well-publicized syringe distribution and syringe exchange services.

The Integrated HIV Prevention & Care Plan targets the highest risk populations including men who have sex with other men and injection drug users, for HIV prevention and care services. Needle exchange remains an integral component of the plan. In Contra Costa County, we anticipate continuing the use of County General Funds for needle exchange services to support the downward trend in HIV infections attributed to injection drug use. The current plan can be found on the Public Health website at <u>http://cchealth.org/aids</u>.

Data-to-Care Programs

Data-to-Care is a public health strategy that aims to use HIV and STD surveillance data to identify HIV-diagnosed individuals and those at highest risk for HIV not in care, link them to care, and support the HIV Care Continuum. In this reporting period, the HIV/AIDS & STD Program continued to offer two data-to-care interventions that prioritize high-risk individuals: 1) targeted outreach to individuals who have been recently diagnosed with an STD, including individuals who are co-infected with HIV and STDs, and 2) a PrEP Navigation Program for Contra Costa residents.

PrEP (pre-exposure prophylaxis) is the use of anti-retroviral medication to prevent acquisition of HIV infection. It is used by HIV-negative persons who are at high risk of being exposed to HIV through sexual contact or injection drug use. Studies have shown that PrEP reduces the risk of getting HIV from sex by about 99% when taken daily. Among people who inject drugs, PrEP reduces the risk of getting HIV by at least 74% when taken daily.⁷ At present, there are two medications with an FDA-approved indication for PrEP: tenofovir disoproxil fumarate-emtricitabine, which is available as a fixed-dose combination in a tablet called Truvada® and emtricitabine & tenofovir alafenamide tenofovir, which is available in a fixed-dose combination in a tablet called Descovy®. Both pills are once-daily prescription medicine for adults and adolescents at risk of HIV who weigh at least 77 pounds. Both medications are also commonly used in the treatment of HIV. The main difference is that Descovy® for PrEP is recommended to prevent HIV for people at risk through sex, excluding people at risk through receptive vaginal sex. Descovy has not yet been studied for HIV prevention for receptive vaginal sex, so it may not be appropriate for some people. PrEP should be considered part of a comprehensive prevention plan that includes adherence, risk reduction counseling, HIV prevention education and provision of condoms.

The Line List targeted outreach intervention consists of generating lists that are pulled from State and County surveillance systems. These line lists are focused on three high-risk populations: MSMs recently diagnosed with one or more STD, women of color (African American, Latinas, Asian/Pacific Islander, and multiracial women) recently diagnosed with one or more STD, and individuals co-infected with HIV and STD(s).

⁷ https://www.cdc.gov/hiv/basics/prep.html

Trained Disease Intervention Technicians (DITs) call the individuals on the line lists and offer risk reduction services, partner services, and, in the case of people who do not have HIV, Pre-Exposure Prophylaxis (PrEP) navigation services. In this reporting period, DITs provided risk reduction services to a total of 881 individuals (729 HIV negative and 152 PLHIV).

OPIOID OVERDOSE

Opioids are medications that relieve pain. They reduce the intensity of pain signals reaching the brain, diminishing the effects of a painful stimulus. Medications that fall within this class include hydrocodone (e.g., Vicodin), oxycodone (e.g., OxyContin, Percocet), morphine (e.g., Kadian, Avinza), codeine, and related drugs. Hydrocodone products are the most prescribed for a variety of painful conditions, including dental and injury-related pain. Morphine is often used before and after surgical procedures to alleviate severe pain. Codeine is often prescribed for mild pain. In addition to their pain-relieving properties, some of these drugs—codeine and diphenoxylate (Lomotil) for example—can be used to relieve coughs or severe diarrhea.

Heroin is an opioid drug that is synthesized from morphine. In 2016, 948,000 Americans reported using heroin in the past year, a number that has been on the rise since 2007. The greatest increases in heroin use and are among individuals aged 18-25.⁸

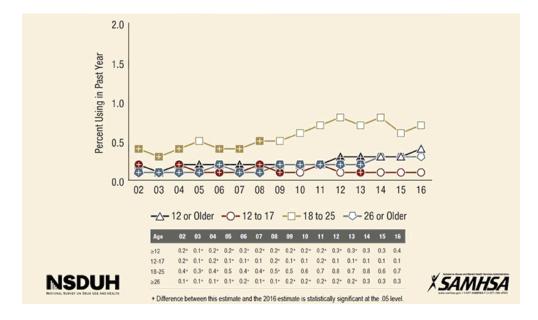


Chart 10: Past Heroin Use among People Aged 12 or Older (2012-2016)

⁸ https://www.drugabuse.gov/publications/research-reports/heroin/scope-heroin-use-in-united-states

Data from 2011 showed that nearly 80% of Americans using heroin report misusing prescription opioids first, and it is estimated that about 23% of individuals who use heroin become dependent on it.⁹ Prescription opioid pain medications such as Oxycontin and Vicodin can have effects similar to heroin when taken in doses or in ways other than prescribed, and they are currently **among** the most commonly abused drugs in the United States.

In FY18/19, approximately 68% of IDUs served in AOD programs identified Heroin as their primary problem at admission, which is up from 60% in FY 16/17.

The California Department of Health reported 2,428 opioid-related overdose deaths in 2018, nearly half involving prescription opioids. This marks a 42% increase since 2012.¹⁰ In Contra Costa County, there were 81 opioid deaths in 2018 and 84 in 2019,¹¹ which is a marked increase from the 50 opioid overdose deaths reported in 2016.¹² All regions of the county have experienced fatal overdoses, emergency department visits, and hospitalizations due to opioid overdose.

Recognizing the life-saving effects of the opioid-overdose reversal drug naloxone, Senate Bill (SB) 833 (Chapter 30, Statutes of 2016) established a new Naloxone Grant Program within the California Department of Public Health (CDPH).¹³ The goal of the program was to reduce fatal overdoses by increasing access to naloxone nasal spray called Narcan.

In 2017-2019, the HIV/AIDS and STD Program administered the Naloxone Grant Program by distributing the county's 1,642 State-allotted doses to local community agencies with existing naloxone distribution systems and those working with individuals most likely to experience or witness opioid overdoses.

After this successful pilot program, the California Department of Health Care Services began providing free naloxone directly to organizations and entities.

⁹ http://www.drugabuse.gov/publications/drugfacts/heroin

¹⁰ https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/SACB/Pages/PrescriptionDrugOverdoseProgram.aspx

¹¹ 2019 data is preliminary and may increase slightly.

¹² https://pdop.shinyapps.io/ODdash_v1/

¹³ https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/SACB/Pages/NaloxoneGrantProgram.aspx

DISPOSAL

Contra Costa Environmental Health (CCEH) administers the Medical Waste Management Program for Contra Costa County and is the local enforcement and regulatory agency for Medical Waste Generators. CCEH issues permits and registers generators of medical waste, responds to complaints of abandoned medical waste on public property, and implements the Medical Waste Management Act (Part 14, C. 1-11 of the California Health and Safety Code). The agency web site maintains a list of frequently asked questions (FAQs) on syringe and needle disposal, a list of disposal sites in Contra Costa, a number of pamphlets describing the proper disposal of syringes and other medical waste, as well as links to state and other resources. Additional information can be found at <u>https://cchealth.org/eh/medical-waste/faq.php</u>.

Contra Costa Regional Medical Center Sheriff's Substation - New 2500 Alhambra Ave., Martinez	Accepts all household pharmaceutical waste Open to all residents	Monday - Friday 8 a.m. – 5 p.m.
CCC Sheriff's Field Operations Building - New 1980 Muir Road, Martinez	Accepts all household pharmaceutical waste Open to all residents	Monday - Friday 8 a.m. – 5 p.m.
Walnut Creek City Hall - New 1666 North main Street, Walnut Creek	Accepts all household pharmaceutical waste Open to all residents	Monday - Friday 8 a.m. – 5 p.m.
West County Household Hazardous Waste Facility 101 Pittsburg Ave., Richmond	Accepts non-controlled household pharmaceutical waste Open to West County residents only	Thursday, Friday, and First Saturday of every month 9 a.m 4 p.m. (Closed 12 - 12:30 p.m. for lunch)
Delta Household Hazardous Waste Collection Facility 2500 Pittsburg - Antioch Highway, Pittsburg	Accepts non-controlled household pharmaceutical waste.	Thursday, Friday, and Saturday 9 a.m 4 p.m.

Open to East County residents only

Pharmaceutical Disposal

City Center Pharmacy Brentwood, Inc 50 Eagle Rock Way, Ste C Brentwood, CA 94513

City of Clayton, Police Department, City Hall 6000 Heritage Trail, Clayton

City of Concord, Police Department 1350 Galindo Street, Concord

Town of Danville, Police Department 510 La Gonda Way, Danville

City of Martinez, Police Department, City Hall 525 Henrietta Street, Martinez

Town of Moraga, Police Department 329 Rheem Blvd., Moraga

City of Orinda, Police Department, City Hall 22 Orinda Way, Orinda

City of Pleasant Hill, Police Department 330 Civic Drive, Pleasant Hill

City of San Ramon, Police Department 2401 Crow Canyon Road, San Ramon

City of Walnut Creek, Police Department, City Hall 1666 North Main Street, Walnut Creek

City of Richmond, Police Department 1701 Regatta Blvd, Richmond

West County Wastewater District Office 2910 Hilltop Drive, Richmond

City of Pinole, Police Department 880 Tennent Avenue, Pinole

El Cerrito Recycling Center 7501 Schmidt Lane, El Cerrito

The Public Health HIV/AIDS and STD program has received no complaints from law enforcement, businesses, pharmacies, or community members regarding discarded syringes this year.

CONCLUSIONS:

1. Access to sterile needles has made a difference in Contra Costa and remains an important component of the overall strategy to reduce transmission of blood borne diseases.

2. Law enforcement exposure to potential blood borne pathogens via needle stick injury has not increased with the implementation of needle exchange and pharmacy sales. Materials for Law Enforcement to document potential exposure and request assistance are available on the website.

3. The current one-for-one syringe exchange model needs to change to a modified needs-based model to better serve Contra Costa residents who inject drugs during the COVID-19 response and beyond and to be aligned with Federal and State guidelines (see document titled "Needle Exchange Recommendation to Change Model for Family & Human Services Committee").

4. **Needle exchange is a critical component and essential service** of Contra Costa's HIV prevention strategy and should remain in effect until further notice. Needle exchange is also the primary strategy that addresses Contra Costa's opioid epidemic by increasing naloxone access and linking people to substance use treatment programs.

RECOMMENDATIONS

- Direct the Health Services Department to continue to support and monitor sterile needle exchange services and adopt a modified "needs-based" distribution exchange model with built in incentives to return used needles.
- Increase current Board of Supervisor funding of Syringe Exchange Program (SEP) from \$72,000 to \$97,000 to support the modified needs-based distribution model.

GLOSSARY

Terms currently used to discuss needle exchange services include:

- Sterile needle/syringe *instead* of clean needle/syringe
- □ Used needle/syringe *instead* of dirty needle/syringe
- □ People who inject drugs (PWID) *instead* of Injection Drug Users (IDUs)
- One-for-one exchange model involves exchanging one sterile needle/syringe for a used one; the individual cannot get any additional needles/syringes.
- Needs-based exchange model is less restrictive and allows individuals to receive as many needles/syringes as they self-report using in a given day, without regard to the number of needles and syringes returned. This model increases opportunity for PWID to always have a sterile needle on hand.

SUMMARY

In 2006, the Contra Costa Board of Supervisors:

- Terminated the local State of Emergency first declared on December 14, 1999;
- Authorized the Health Services Department to administer a "clean needle and syringe exchange project" pursuant to Health and Safety Code section 121349 et seq; and
- Directed the Health Services Director to support a "one-for-one" sterile needle exchange model (i.e. one sterile needle in exchange for a used needle).

BACKGROUND ON ACCESS TO CLEAN NEEDLES TO REDUCE TRANSMISSION

The California Department of Public Health (CDPH) reports that of the 136,566 people living with HIV/AIDS in California in 2018, 6% identified their risk for HIV as IDU.¹ The CDPH Office of Viral Hepatitis reports that transmission of hepatitis C is primarily through sharing needles, syringes or other drug injection equipment. Lack of access to new, sterile injection equipment is one of the primary risk factors that may lead to sharing of hypodermic needles and syringes, which puts people who inject drugs at high risk for HIV, HCV, and Hepatitis B infection.²

Needle exchange has been an essential component of Contra Costa's strategy to reduce HIV transmission attributed to IDU since 1999, when the program operated under the Board's declaration of a State of Emergency to authorize needle exchange services. Health and Safety Code Section 121349.3 removed the requirement for a Declaration of Emergency and current regulations now require only that needle exchange information be provided at an open meeting of the authorizing body every two years.

In April 2020, CDPH updated their Guidelines for Syringe Exchange Programs Funded by the California Department of Public Health Office of AIDS and addressed the need to move away from the one-for-one model:

"Restrictive syringe access policies such as variations on one-for-one exchange or the imposition of limits on the number of syringes participants may acquire per transaction are not supported by public health evidence and may impose harm upon SEP participants. This recommendation follows the U.S. Public Health Service guidance that advises people who inject drugs to use a new, sterile needle and syringe for each injection.³ This Issue Brief does not supersede legal requirements for SEP operation established in California state laws or by county or municipal laws."⁴

The guidelines also contain guidance to encourage syringe collection and disposal policies and procedures that:

a. Encourage program participants to return used syringes to the program, and/or to dispose of them properly;

b. Collect sharps waste in such a way as to minimize direct handling by program staff, volunteers and clients. Returned syringes should not be individually counted.

¹ https://www.cdph.ca.gov/

https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/California_HIV_Surveillance_Report2018.pdf ² https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/2018-Chronic-HCV-Surveillance-Report-Exec-Summary.pdf

³ CDC. (1997). Health Resources and Services Administration, National Institute on Drug Abuse and

Substance Abuse and Mental Health Services Administration. HIV prevention bulletin: Medical advice for persons who inject illicit drugs. Retrieved May 29, 2016.

⁴ <u>https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/Guidelines%20for%20SEPs_ADA.pdf</u>

The number of returned syringes may be calculated through recording volume or weight of returned sharps containers, or through other methods that avoid direct handling of sharps waste.

HIV Education Prevention Project of Alameda County (HEPPAC) is the subcontractor that has been providing sterile needle exchange services in Contra Costa County since July 2013 when they took over the contract previously held by the late Bobby Bowen.

Since needle exchange services began in Contra Costa County, the one-for-one model (one used needle in exchange for one sterile needle) has been in place. However, State and Federal guidelines are now supporting the "needs-based" exchange model which provides each individual who injects drugs with a new, sterile needle and syringe for each injection. The number of new, sterile needles and syringes each client receives is based on self-reported daily use, despite the number of used needles a client brings back to the exchange site. As a modified version of this model, HEPPAC would include incentives for clients to bring back their used needles by giving them verbal praise, additional bio buckets, and when available, a \$5 voucher for a Subway sandwich. HEPPAC staff report that verbal praise is the most useful strategy, since they let clients know how important their efforts are in keeping used syringes from littering shared, public spaces. In the modified needsbased model, HEPPAC staff would also place a cap on the number of sterile needles and syringes to be received by each client based on their historical use. For example, if a client reports needing 25 needles per day and is given 350 needles for a two-week period, but at their next exchange encounter they report needing two or three times more needles, they will only receive their usual allotment of 350 needles. This example only applies to individuals exchanging for themselves and does not apply to individuals exchanging for themselves and others (secondary exchangers). HEPPAC has a demonstrated ability of getting to know their clients and their use habits, as well as documenting all of their exchanges. Therefore, creating and enforcing a cap will not be problematic for HEPPAC staff.

HEPPAC is ready and willing to change from the one-for-one model to a modified needs-based model for the following reasons:

- The modified needs-based model follows public health best practices: it aligns with recommendations from the US Public Health Service and the Centers for Disease Control and Prevention.
- It has a history of successful implementation in Alameda County: HEPPAC has been operating a modified needs-based model in Alameda County for the last four years and they have successfully incentivized clients to return used needles.

- It reduces COVID-19 risk of transmission: during the COVID-19 response, it is best to offer PWIDs enough sterile needles and syringes to last a minimum of two weeks before they have to come back to the exchange site to get additional supplies (reducing their exposure to others in the community).
- It makes better economic sense: economic studies have predicted that SEPs could prevent HIV infections among clients, their sex partners, and offspring at a cost of about \$13,000 per infection averted. This is significantly less than the lifetime cost of treating an HIV-infected person, which is estimated to be \$385,200.⁵
- It reduces risk of HIV transmission: The National Institutes of Health Consensus Panel on HIV Prevention stated, "An impressive body of evidence suggests powerful effects from needle exchange programs....Studies show reduction in risk behavior as high as 80 percent, with estimates of a 30 percent or greater reduction of HIV in IDUs."⁶

In order to make the shift from the current one-for-one to the modified needs-based distribution model, HEPPAC will need a modest augmentation to their budget to cover the costs of additional needles and other harm reduction supplies. The current yearly amount approved by the Board of Supervisors for needle exchange services is \$72,000, and an additional \$25,000 would be needed to provide services using the modified needs-based model in Contra Costa County.

⁵ Cohen, D.A., Wu, S-Y., Farley, T.A. Cost-effective allocation of government funds to prevent HIV infection. Health Affairs 2005; 24:915-926.

⁶ National Institutes of Health. Consensus development statement. Interventions to prevent HIV risk behaviors, February 11-13,1997;7-8.



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND	HUMAN SERVICES COMMITTEE	7.
Meeting Date:	06/22/2020	
<u>Subject:</u>	CONSIDER receiving a report on Mental Health Services Act (MHS.	A) funding
Submitted For:	David Twa, County Administrator	
Department:	County Administrator	
Referral No.:	117	
Referral Name:	Mental Health Services Act (MHSA) funding	
Presenter:	Suzanne Tavano & Jennifer Bruggeman <u>Conta</u>	act:

Referral History:

A recent state audit appears to indicate that California counties are not spending money from a special tax on millionaires that should be spent on mental health programs. The audit found that county mental health programs had not spent \$231 million from the tax that should have been returned to the state by the end of the 2015-16 budget year. Approved by California voters in November 2004, Proposition 63 imposes a 1% tax on incomes in excess of \$1 million and directs those collections to the provision of mental health services. The Mental Health Services Act (MHSA) has expanded mental health care programs for children, transition age youth, adults, and older adults. Services are client and family driven and include culturally and linguistically appropriate approaches to address the needs of underserved populations. They must include prevention and early intervention as well as innovative approaches to increasing access, improving outcomes and promoting integrated service delivery. The MHSA added Section 5891 to the Welfare & Institutions Code, which reads in part, "The funding established pursuant to this Act shall be utilized to expand mental health services. These funds shall not be used to supplant existing state or county funds utilized to provide mental health services". The first yearly MHSA Program and Expenditure Plan for Community Services and Supports was approved by the Board of Supervisors and submitted to the State Department of Mental Health on December 22, 2005. The Prevention and Early Intervention component was added in 2009, and the remaining components of Innovation, Workforce Education and Training, and Capital Facilities/Information Technology were added in FY 2010-11. Each subsequent year an annual update was approved, which included program refinements, program changes when indicated, and the development of new programs identified by a local stakeholder-driven community program planning process. Contra Costa integrated the five components into the MHSA Three Year Program and Expenditure Plan for FYs 2014-17, and provided an annual plan update in FY 2015-16 and 2016-17.

The MHSA Three Year Program and Expenditure Plan for FYs 2017-20 was approved and published in June 2017.

On March 20, 2018, the Board referred to the Family and Human Services Committee the issue of

MHSA / Proposition 63 funding and this became Referral No. 117 to this Committee.

Referral Update:

Attached is a status report from the Health Services Department Behavioral Health Division on the MHSA Planning process and funding.

Recommendation(s)/Next Step(s):

ACCEPT a report on the status of the Mental Health Services Act Plan and funding from the Health Services Department Behavioral Health Division. (Jennifer Bruggeman, Mental Health Services Act Program Manager)

Fiscal Impact (if any):

The MHSA expenditure plan has already been approved by the Board of Supervisors, therefore, there is no fiscal impact. In June of 2017, an average yearly budget (\$51.3 million) in the MHSA Three Year Program and Expenditure Plan for FY 2017-20 was approved by the Board. This budget exceeded anticipated revenues (\$45.3 million annually) by an average of \$6 million per year. In partnership with stakeholders the County has already embarked on a Three Year Plan to spend down the County's MHSA reserves to approximately \$25 million by July 2020.

Attachments

Status Report for the MHSA Plan and Funding

Status Report for the Mental Health Services (MHSA) Three Year Plan

Presented to Family and Human Services Committee on June 22, 2020

The Mental Health Services Act Consolidated Planning and Advisory Workgroup (CPAW) met monthly throughout the year to review existing MHSA funded programs and contribute to the development of the MHSA Three Year Plan. Additionally, large community forums were held focused on target areas for potential inclusion in the next Three Year Plan. These forums were held in different regions of the County and focused on Suicide Prevention, Housing, and Early Childhood Mental Health. Community stakeholder recommendations made during these listening sessions were incorporated into the planning process.

Based on financial forecasts made in the Fall and Early Winter of 2019, it appeared expansion of existing services and potential new initiatives would be possible, inclusive of increased funding for housing, suicide prevention training and early childhood mental health. The MHSA Three Year Program and Expenditure Plan 2020-2023 – Draft version completed in Feb, 2020 incorporated these and was posted for a 30 day Public Comment period. Soon after, California and Contra Costa County responded to the emerging COVID 19 pandemic and further planning pended since it became clear there would be financial impact to funding for behavioral health services. Due to significantly decreased tax revenues collected by the state and distributed to the counties, it became evident that we were entering a period of financial decline which would not support the previous plan of significant growth. Consequently, the request was made to the Mental Health Commission (MHC) to postpone the required public hearing. The MHC agreed and passed a motion to postpone delivery of the 2020-2023 Three Year Plan until September, 2020. The intent was to allow time to fully understand the impact of future Realignment and MHSA funding shortfalls and adjust the plan accordingly.

Through the California Behavioral Health Directors Association (CBHDA), counties have requested five major areas of flexibility regarding MHSA. One of those is a postponement of one year for 3 Year Plans normally due on June 30th. We expect that agreement to be finalized in writing by the end of the month.

At the Mental Health Commission meeting on May 6th, 2020 a recommendation was made that the Board of Supervisors permit our current plan to remain in effect until at least September. The intent is to remain with the current year plan until our budget is finalized. All contracts are currently on hold, including those with MHSA funds, until we fully understand the state and local financial impact on the Behavioral Health Services Division.

We hope to return to the Family and Human Services Committee by September to present a revised version of the 3 Year Plan.

Thank you.



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

8.

<u>Subject:</u>		
<u>Department:</u>	County Administrator	
<u>Referral No.:</u>		
<u>Referral Name:</u>		
Presenter:		Contact:

Referral History:

The Health and Human Services Committee maintains an annual workplan to effectively manage the timely review of various referrals from the Board of Supervisors.

Referral Update:

The committee last reviewed the Annual Workplan on February 24, 2020. Since then, committee meetings in March and April were cancelled due to the COVID health emergency. Many items were rescheduled. This item will provide the committee with the chance to provide direction to staff about the schedule of future agendas.

Recommendation(s)/Next Step(s):

REVIEW Annual Committee Work Plan and provide direction to staff as needed.

Fiscal Impact (if any):

NA

Attachments

REVISED Annual Workplan

2020 Family Human Services Committee Workplan - June 22, 2020

Meeting Details	Agenda Items
	HIV Prevention Needle Exchange Program (#61)
June 22, 2020 9:00 - 10:30	Mental Health Services Act Funding (#118)
Virtual	SNAP/CalFresh Update (#103)
	Appointment Recommendations as needed
	1
	East Bay Veteran's Stand Down event on August 27-30 (#56)
	Community Services Bureau/Head Start Oversight with staffing report (#78)
July 27, 2020 9:00 - 10:30	Cultural Plan Prospectus
Virtual Items due by 5:00PM 7/17/2020	Family Justice Center & Commercially Sexually Exploited Children (#111)
	Child Care Needs Assessment Review (#81) and Local Planning Council appointments- Countywide Child Care Report (#92)
	Appointment Recommendations as needed
August 24, 2020 9:00 - 10:30	AOT - Assisted Outpatient Treatment (Laura's Law) (#107)
Virtual	Policy Options for protecting Youth from Tobacco Influences in the retail
Items due by	environment (#112)
5:00PM 8/14/2020	Secondhand Smoke Ordinance (#82) Appointment Recommendations as needed

I

2020 Family Human Services Committee Workplan - June 22, 2020

September 28, 2020 9:00 - 10:30 Room 101 Items due by 5:00PM 9/18/2020	Adult Protective Services and Challenges for Aged & Disability Populations including status of the Aging Master Plan (#45) Innovative Community Services (#110) Appointment Recommendations as needed
October 26, 2020 9:00 - 10:30 Room 101 Items due by 5:00PM 10/16/2020	Challenges for EHSD (#44) - Includes Continuum of Care Reform Report Youth Services Report - (Includes Independent Living Skills Program Report) (#93) Appointment Recommendations as needed
November 23, 2020 9:00 - 10:30 Room 101 Items due by 5:00PM 11/13/2020	SNAP/CalFresh Update (#103) Public Mental Health Care System (#115/116) Appointment Recommendations as needed